Official Form 1 (1/08)

Name of Debtor   Graduous and cut. cr. ras. Mades	( )	<b>United Stat</b>	es Bankru	ptcy (	Cour	t			Voluntary	Petition
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All Other Parries used by the Debtor in the bad 8 years (included marries, particle, and in the bad 8 years (included marries, particle, and make more):	Name of Debtor (if individual, enter Last, First	Middle):			Nar	ne of Joint D	ebtor (Spou	se)(Last, First, Mid-	dle):	
Include married, marker, and trade names).   Acta Just 1   Acta Just 2	Franklin, Jeffrey Ronalo	!								
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Location of Principal Assets of Business Debtor (Form of organization) (Clock one box.)	SAME									
Type of Debtor (Form of organization) (Check one box.)    Chapter of Business (Check one box.)   Single Asset Real Esute as defined in 11 U.S.C. § 101 (51B)   Chapter 15 Petition for Recognition of a Foreign Main Proceeding   Chapter 15 Petition for Recognition of a Foreign Main Proceeding   Chapter 15 Petition for Recognition of a Foreign Main Proceeding   Chapter 15 Petition for Recognition of a Foreign Main Proceeding   Stockholzer   Chapter 15 Petition for Recognition of a Foreign Main Proceeding   Stockholzer   Chapter 15 Petition for Recognition of a Foreign Main Proceeding   Stockholzer   Chapter 15 Petition for Recognition of a Foreign Main Proceeding   Stockholzer   Chapter 15 Petition for Recognition of a Foreign Main Proceeding   Stockholzer   Chapter 15 Petition for Recognition of a Foreign Main Proceeding   Stockholzer   Chapter 15 Petition for Recognition of a Foreign Main Proceeding   Stockholzer   Chapter 15 Petition for Recognition of a Foreign Main Proceeding   Stockholzer   Chapter 15 Petition for Recognition of a Foreign Main Proceeding   Stockholzer   Chapter 15 Petition for Recognition of a Foreign Main Proceeding   Stockholzer   Chapter 15 Petition for Recognition of a Foreign Main Proceeding   Stockholzer			ZIPCODE							ZIPCODE
Check one box		ebtor <b>PPLICABLE</b>								ZIPCODE
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Pattereship	Corporation (includes LLC and LLP)	<u> </u>	101 (51B)							
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Check one box:		Clearing Bank					-	,		
Tax-Exempt Entity (Check bo, if applicable.)   Debtor is a tax-exempt organization under Title 26 of the United States   Code (the Internal Revenue Code).   Debtor is not a small business as defined in 11 U.S.C. § 101(51D).		Other				individual p	rimarily for a			
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Filing Fee to be paid in installments (applicable to individuals only). Must attach signed application for the court's consideration certifying that the debtor is unable to pay fee except in installments. Rule 1006(b). See Official Form 3A.    Filing Fee waiver requested (applicable to chapter 7 individuals only). Must attach signed application for the court's consideration. See Offi cial Form 3B.    Filing Fee waiver requested (applicable to chapter 7 individuals only). Must attach signed application for the court's consideration. See Offi cial Form 3B.    Aplan is being filed with this petition   Acceptances of the plan were solicited prepetition from one or more classes of creditors, in accordance with 11 U.S.C. § 1126(b).    Statistical/Administrative Information   Debtor estimates that funds will be available for distribution to unsecured creditors.   Debtor estimates that, after any exempt property is excluded and administrative expenses paid, there will be no funds available for distribution to unsecured creditors.   Estimated Number of Creditors   Description   Descri		ck one box)					gate nonconti	ngent liquidate	d debts (excluding de	ebts owed
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Filing Fee waiver requested (applicable to chapter 7 individuals only). Must attach signed application for the court's consideration. See Offi cial Form 3B.    A plan is being filed with this petition     Acceptances of the plan were solicited prepetition from one or more classes of creditors, in accordance with 11 U.S.C. § 1126(b).    Statistical/Administrative Information     Debtor estimates that funds will be available for distribution to unsecured creditors.     Debtor estimates that, after any exempt property is excluded and administrative expenses paid, there will be no funds available for distribution to unsecured creditors.     Estimated Number of Creditors     1-49	0 11	, .			Cho					
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Debtor estimates that, after any exempt property is excluded and administrative expenses paid, there will be no funds available for distribution to unsecured creditors.  Estimated Number of Creditors    1-49	Statistical/Administrative Information								THIS SPACE IS FOR	COURT USE ONLY
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Official Form 1 (1/08) FORM B1, Page Name of Debtor(s): Voluntary Petition (This page must be completed and filed in every case) Jeffrey Ronald Franklin All Prior Bankruptcy Cases Filed Within Last 8 Years (If more than two, attach additional sheet) Location Where Filed: Case Number: Date Filed: NONE Location Where Filed: Case Number: Date Filed: (If more than one, attach additional sheet) Pending Bankruptcy Case Filed by any Spouse, Partner or Affiliate of this Debtor Name of Debtor: Date Filed: NONE District: Relationship: Judge: Exhibit A Exhibit B (To be completed if debtor is required to file periodic reports (To be completed if debtor is an individual (e.g., forms 10K and 10Q) with the Securities and Exchange whose debts are primarily consumer debts) Commission pursuant to Section 13 or 15(d) of the Securities I, the attorney for the petitioner named in the foregoing petition, declare that I Exchange Act of 1934 and is requesting relief under Chapter 11) have informed the petitioner that [he or she] may proceed under chapter 7, 11, 12 or 13 of title 11, United States Code, and have explained the relief available under each such chapter. I further certify that I have delivered to the debtor the notice required by 11 U.S.C. §342(b). Exhibit A is attached and made a part of this petition 09/28/2009 /s/ Brian Potts Signature of Attorney for Debtor(s) Exhibit C Does the debtor own or have possession of any property that poses or is alleged to pose a threat of imminent and identifiable harm to public health or safety? Yes, and exhibit C is attached and made a part of this petition.  $\times$ No Exhibit D (To be completed by every individual debtor. If a joint petition is filed, each spouse must complete and attach a separate Exhibit D.) Exhibit D completed and signed by the debtor is attached and made part of this petition. If this is a joint petition: Exhibit D also completed and signed by the joint debtor is attached and made a part of this petition. Information Regarding the Debtor - Venue (Check any applicable box) Debtor has been domiciled or has had a residence, principal place of business, or principal assets in this District for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other District. There is a bankruptcy case concerning debtor's affiliate, general partner, or partnership pending in this District. Debtor is a debtor in a foreign proceeding and has its principal place of business or principal assets in the United States in this District, or has no principal place of business or assets in the United States but is a defendant in an action proceeding [in a federal or state court] in this District, or the interests of the parties will be served in regard to the relief sought in this District. Certification by a Debtor Who Resides as a Tenant of Residential Property (Check all applicable boxes.) Landlord has a judgment against the debtor for possession of debtor's residence. (If box checked, complete the following.) (Name of landlord that obtained judgment) (Address of landlord) Debtor claims that under applicable nonbankruptcy law, there are circumstances under which the debtor would be permitted to cure the entire monetary default that gave rise to the judgment for possession, after the judgment for possession was entered, and Debtor has included with this petition the deposit with the court of any rent that would become due during the 30-day period after the filing of the petition. Debtor certifies that he/she has served the Landlord with this certification. (11 U.S.C. § 362(1)).

Official Form 1 (1/08) FORM B1, Page 3 Name of Debtor(s): **Voluntary Petition** (This page must be completed and filed in every case) Jeffrey Ronald Franklin Signatures Signature(s) of Debtor(s) (Individual/Joint) Signature of a Foreign Representative I declare under penalty of perjury that the information provided in this I declare under penalty of perjury that the information provided in this petition is true and correct. [If petitioner is an individual whose debts are primarily consumer debts petition is true and correct, that I am the foreign representative of a debtor and has chosen to file under chapter 7] I am aware that I may proceed in a foreign proceeding, and that I am authorized to file this petition. under chapter 7, 11, 12, or 13 of title 11, United States Code, understand the relief available under each such chapter, and choose to (Check only one box.) proceed under chapter 7. I request relief in accordance with chapter 15 of title 11, United States [If no attorney represents me and no bankruptcy petition preparer Code. Certified copies of the documents required by 11 U.S.C. § 1515 are signs the petition] I have obtained and read the notice required by attached. 11 U.S.C. §342(b) Pursuant to 11 U.S.C. § 1511, I request relief in accordance with the I request relief in accordance with the chapter of title 11, United States chapter of title 11 specified in this petition. A certified copy of the order Code, specified in this petition. granting recognition of the foreign main proceeding is attached. X /s/ Jeffrey Ronald Franklin Signature of Debtor (Signature of Foreign Representative) Signature of Joint Debtor (Printed name of Foreign Representative) Telephone Number (if not represented by attorney) 09/28/2009 (Date) 09/28/2009 Signature of Attorney\* Signature of Non-Attorney Bankruptcy Petition Preparer X /s/ Brian Potts I declare under penalty of perjury that: (1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; (2) I prepared this document for Signature of Attorney for Debtor(s) compensation and have provided the debtor with a copy of this document Brian Potts 182097 and the notices and information required under 11 U.S.C. §§ 110(b), 110(h), and 342(b); and, (3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110(h) setting a maximum fee for services chargeable by Printed Name of Attorney for Debtor(s) KRYSAK & ASSOCIATES bankruptcy petition preparers, I have given the debtor notice of the Firm Name maximum amount before preparing any document for filing for a debtor or 525 D STREET accepting any fee from the debtor, as required in that section. Official Form 19 is attached. 92065 RAMONA CA Printed Name and title, if any, of Bankruptcy Petition Preparer (760)789 - 9314Telephone Number Social-Security number (If the bankruptcy petition preparer is not an individual, state the Social-Security number of the officer, principal, 09/28/2009 responsible person or partner of the bankruptcy petition preparer.) (Required by 11 U.S.C. § 110.) \*In a case in which § 707(b)(4)(D) applies, this signature also constitutes a certification that the attorney has no knowledge after an inquiry that the information in the schedules is incorrect Address Signature of Debtor (Corporation/Partnership) I declare under penalty of perjury that the information provided in this petition is true and correct, and that I have been authorized to file this petition on behalf of the debtor. Signature of bankruptcy petition preparer or officer, principal, responsible person, or partner whose Social-Security number is provided above. The debtor requests the relief in accordance with the chapter of title 11, United States Code, specified in this petition. Names and Social-Security numbers of all other individuals who prepared or assisted in preparing this document unless the bankruptcy petition preparer is not an individual. Signature of Authorized Individual Printed Name of Authorized Individual If more than one person prepared this document, attach additional sheets conforming to the appropriate official form for each person. A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both. 11 U.S.C. § 110; 18 U.S.C. § 156. Title of Authorized Individual 09/28/2009

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# UNITED STATES BANKRUPTCY COURT SOUTHERN DISTRICT OF CALIFORNIA

NIC Jeffrey Ronald Franklin	Case No.
	Chapter 7
Debtor(s)	

# EXHIBIT D - INDIVIDUAL DEBTOR'S STATEMENT OF COMPLIANCE WITH CREDIT COUNSELING REQUIREMENT

WARNING: You must be able to check truthfully one of the five statements regarding credit counseling listed below. If you cannot do so, you are not eligible to file a bankruptcy case, and the court can dismiss any case you do file. If that happens, you will lose whatever filing fee you paid, and your creditors will be able to resume collection activities against you. If your case is dismissed and you file another bankruptcy case later, you may be required to pay a second filing fee and you may have to take extra steps to stop creditors' collection activities.

Every individual debtor must file this Exhibit D. If a joint petition is filed, each spouse must complete and file a separate Exhibit D. Check one of the five statements below and attach any documents as directed.

Exhibit D. Check one of the five statements below and attach any documents as directed.
1. Within the 180 days <b>before the filing of my bankruptcy case</b> , I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, and I have a certificate from the agency describing the services provided to me. Attach a copy of the certificate and a copy of any debt repayment plan developed through the agency.
2. Within the 180 days <b>before the filing of my bankruptcy case,</b> I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, but I do not I have a certificate from the agency describing the services provided to me. You must file a copy of a certificate from the agency describing the services provided to you and a copy of any debt repayment plan developed through the agency no later than 15 days after your bankruptcy case is filed.
3. I certify that I requested credit counseling services from an approved agency but was unable to obtain the services during the five days from the time I made my request, and the following exigent circumstances merit a temporary waiver of the credit counseling requirement so I can file my bankruptcy case now. [Summarize exigent circumstances here.]

If your certification is satisfactory to the court, you must still obtain the credit counseling briefing within the first 30 days after you file your bankruptcy petition and promptly file a certificate from the agency that provided the counseling, together with a copy of any debt management plan developed through the agency. Failure to fulfill these requirements may result in dismissal of your case. Any extension of the 30-day deadline can be granted only for cause and is limited to a maximum of 15 days. Your case may also be dismissed if the court is not satisfied with your reasons for filing your bankruptcy case without first receiving a credit counseling briefing.

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B 1D (Official Form 1, Exhibit D) (12/08)

4. I am not required to receive a credit counseling briefing because of: [Check the applicable statement]

[Must be accompanied by a motion for determination by the court.]

Incapacity. (Defined in 11 U.S.C. § 109 (h)(4) as impaired by reason of mental illness or mental deficiency so as to be incapable of realizing and making rational decisions with respect to financial responsibilities.);

Disability. (Defined in 11 U.S.C. § 109 (h)(4) as physically impaired to the extent of being unable, after reasonable effort, to participate in a credit counseling briefing in person, by telephone, or through the Internet.);

Active military duty in a military combat zone.

5. The United States trustee or bankruptcy administrator has determined that the credit counseling requirement of 11 U.S.C. § 109(h) does not apply in this district.

I certify under penalty of perjury that the information provided above is true and correct.

/s/ Jeffrey Ronald Franklin

Signature of Debtor:

09/28/2009

Date:

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B22A (Official Form 22A) (Chapter 7) (12/08)

In re Jeff Ronald Franklin	According to the information required to be entered on this statement (check one box as directed in Part I, III, or VI of this statement):
Debtor(s)	☐ The presumption arises.
,	
Case Number:	☐ The presumption is temporarily inapplicable.
(If known)	(Check the box as directed in Parts I, III, and VI of this statement.)

# CHAPTER 7 STATEMENT OF CURRENT MONTHLY INCOME AND MEANS-TEST CALCULATION

In addition to Schedules I and J, this statement must be completed by every individual chapter 7 debtor, whether or not filing jointly. Unless the exclusion in Line 1C applies, joint debtors may complete a single statement. If the exclusion in Line 1C applies, each joint filer must complete a separate statement.

	Part I. MILITARY AND NON-CONSUMER DEBTORS
1A	<b>Disabled Veterans.</b> If you are a disabled veteran described in the Declaration in this Part IA, (1) check the box at the beginning of the Declaration, (2) check the box for "The presumption does not arise" at the top of this statement, and (3) complete the verification in Part VIII. Do not complete any of the remaining parts of this statement.
Ĭ	Declaration of Disabled Veteran. By checking this box, I declare under penalty of perjury that I am a disabled veteran (as defined in 38 U.S.C. § 3741(1)) whose indebtedness occurred primarily during a period in which I was on active duty (as defined in 10 U.S.C. § 101(d)(1)) or while I was performing a homeland defense activity (as defined in 32 U.S.C. §901(1)).
1B	<b>Non-consumer Debtors.</b> If your debts are not primarily consumer debts, check the box below and complete the verification in Part VIII. Do not complete any of the remaining parts of this statement.
	☐ <b>Declaration of non-consumer debts.</b> By checking this box, I declare that my debts are not primarily consumer debts.
1C	Reservists and National Guard Members; active duty or homeland defense activity. Members of a reserve component of the Armed Forces and members of the National Guard who were called to active duty (as defined in 10 U.S.C. § 101(d)(1)) after September 11, 2001, for a period of at least 90 days, or who have performed homeland defense activity (as defined in 32 U.S.C. § 901(1)) for a period of at least 90 days, are excluded from all forms of means testing during the time of active duty or homeland defense activity and for 540 days thereafter (the "exclusion period"). If you qualify for this temporary exclusion, (1) check the appropriate boxes and complete any required information in the Declaration of Reservists and National Guard Members below, (2) check the box for "The presumption is temporarily inapplicable" at the top of this statement, and (3) complete the verification in Part VIII.  During your exclusion period you are not required to complete the balance of this form, but you must complete the form no later than 14 days after the date on which your exclusion period ends, unless the time for filling a motion raising the means test presumption expires in your case before your exclusion period ends.   Declaration of Reservists and National Guard Members. By checking this box and making the appropriate entries below, I declare that I am eligible for a temporary exclusion from means testing because, as a member of a reserve component of the Armed Forces or the National Guard
	<ul> <li>a.</li></ul>

B22A (Official Form 22A) (Chapter 7) (12/08) - Cont.

	Part II. CALCULATION OF MONTHLY INCOME FOR § 707(b)(7) EXCLUSION				
	Marital/filing status. Check the box that applies and complete the balance of this part of this statement as directed. a. ☑ Unmarried. Complete only Column A ("Debtor's Income") for Lines 3-11.				
	b.  Married, not filing jointly, with declaration of separate households. By checking this box, de penalty of perjury: "My spouse and I are legally separated under applicable non-bankruptcy law or living apart other than for the purpose of evading the requirements of § 707(b)(2)(A) of the Bankru Complete only Column A ("Debtor's Income") for Lines 3-11.				
2	c. Married, not filing jointly, without the declaration of separate households set out in Line 2.b above.  Column A ("Debtor's Income") and Column B ("Spouse's Income") for Lines 3-11.				
	d. Married, filing jointly. Complete both Column A ("Debtor's Income") and Column B ("Spouse's Income") for Lines 3-11.				
	All figures must reflect average monthly income received from all sources, derived during the six calendar months prior to filing the bankruptcy case, ending on the last day of the month before the filing. If the amount			Column B	
	of monthly income varied during the six months, you must divide the six month total by six, and er result on the appropriate line.		Debtor's	Spouse's	
3	Gross wages, salary, tips, bonuses, overtime, commissions.		\$0.00	Income \$	
	Income from the operation of a business, profession, or farm.  Subtract Line b from Line	ne a and enter	1		
4	the difference in the appropriate column(s) of Line 4. If you operate more than one business, prof farm, enter aggregate numbers and provide details on an attachment. Do not enter a number less <b>Do not include any part of the business expenses entered on Line b as a deduction in Pa</b>	fession or sthan zero.			
	a. Gross receipts \$4,473.00				
	b. Ordinary and necessary business expenses \$3,856.00		\$617.00	\$	
	c. Business income Subtract Line b from	Line a	ļ ·	7	
	Rent and other real property income. Subtract Line b from Line a and enter the difference in the appropriate column(s) of Line 5. Do not enter a number less than zero. Do not include any part of the operating expenses entered on Line b as a deduction in Part V.				
5	a. Gross receipts \$2,331.00 b. Ordinary and necessary operating expenses \$0.00				
	b. Ordinary and necessary operating expenses \$0.00  c. Rent and other real property income Subtract Line b from	n Line a	12.204.00		
	C. Nell and other real property meetine	Line a	\$2,331.00	\$	
6	Interest, dividends, and royalties.			\$	
7	Pension and retirement income.			\$	
8	Any amounts paid by another person or entity, on a regular basis, for the household exp the debtor or the debtor's dependents, including child support paid for that purpose.  Do not include alimony or separate maintenance payments or amounts paid by your spouse if Col icompleted.		\$0.00	\$	
0	Unemployment compensation. Enter the amount in the appropriate column(s) of Line 9. However, if you contend that unemployment compensation received by you or your spouse was a benefit under the Social Security Act, do not list the amount of such compensation in Column A or B, but instead state the amount in the space below:				
	Unemployment compensation claimed to be a benefit under the Social Security Act  Debtor \$0.00  Spouse \$	-	\$0.00	\$	
10	Income from all other sources. Specify source and amount. If necessary, list additional sources on a separate page. Do not include alimony or separate maintenance payments paid by your spouse if Column B is completed, but include all other payments of alimony or separate maintenance.  Do not include any benefits received under the Social Security Act or payments received as a victim of a war crime, crime against humanity, or as a victim of international or domestic terrorism.				
	a. 0				
	b. 0				
	Total and enter on Line 10		\$0.00	\$	
11	Subtotal of Current Monthly Income for § 707(b)(7). Add Lines 3 thru 10 in Column A, and, if Column B is completed, add Lines 3 through 10 in Column B. Enter the total(s).		\$2,948.00	\$	
12	Total Current Monthly Income for § 707(b)(7). If Column B has been completed, add Line 11, Column A to Line 11, Column B, and enter the total. If Column B has not been completed, enter the amount from Line 11, Column A.		\$2,948.00		

B22A (Official Form 22A) (Chapter 7) (12/08) - Cont.

	Part III. APPLICATION OF § 707(b)(7) EXCLUSION			
13	Annualized Current Monthly Income for § 707(b)(7). Multiply the amount from Line 12 by the number 12 and enter the result.	\$35,376.00		
14	Applicable median family income. Enter the median family income for the applicable state and household size. (This information is available by family size at <a href="www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court.)  a. Enter debtor's state of residence: <a href="CALIFORNIA">CALIFORNIA</a> b. Enter debtor's household size: <a 1="" 13="" 14.="" amount="" and="" arise"="" at="" complete="" do="" does="" href="https://doi.org/10.1001/10&lt;/th&gt;&lt;th&gt;\$49,182.00&lt;/th&gt;&lt;/tr&gt;&lt;tr&gt;&lt;th&gt;15&lt;/th&gt;&lt;th&gt;Application of Section 707(b)(7). Check the applicable box and proceed as directed.  The amount on Line 13 is less than or equal to the amount on Line 14. Check the box for " is="" iv,="" line="" more="" not="" of="" on="" or="" page="" part="" parts="" presumption="" remaining="" statement,="" statement.<="" th="" than="" the="" this="" top="" v,="" vi,="" vii.="" viii;=""><th></th></a>			

### Complete Parts IV, V, VI, and VII of this statement only if required. (See Line 15).

	Part IV. CALCULATION OF CURRENT MONTHLY INCOME FOR § 707(b)(2)				
16	Enter the amount from Line 12.	\$			
17	Marital adjustment. If you checked the box at Line 2.c, enter on Line 17 the total of any income listed in Line 11, Column B that was NOT paid on a regular basis for the household expenses of the debtor or the debtor's dependents. Specify in the lines below the basis for excluding the Column B income (such as payment of the spouse's tax liability or the spouse's support of persons other than the debtor or the debtor's dependents) and the amount of income devoted to each purpose. If necessary, list additional adjustments on a separate page. If you did not check box at Line 2.c, enter zero.  a. \$ b. \$ Total and enter on Line 17	\$			
18	Current monthly income for § 707(b)(2). Subtract Line 17 from Line 16 and enter the result.	\$			

	Part V. CALCULAT	ON OF DEDUCTIONS FROM IN	ICOME
	Subpart A: Deductions under	Standards of the Internal Reve	nue Service (IRS)
19A	National Standards: food, clothing, and other item Standards for Food, Clothing and Other Items for the www.usdoj.gov/ust/ or from the clerk of the bankru	oplicable household size. (This information is a	
19B	National Standards: health care. Enter in Line a1 below the amount from IRS National Standards for Out-of-Pocket Health Care for persons under 65 years of age, and in Line a2 the IRS National Standards for Out-of-Pocket Health Care for persons 65 years of age or older. (This information is available at <a href="www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court.) Enter in Line b1 the number of members of your household who are under 65 years of age, and enter in Line b2 the number of members of your household who are 65 years of age or older. (The total number of household members must be the same as the number stated in Line 14b.) Multiply Line a1 by Line b1 to obtain a total amount for household members under 65, and enter the result in Line c1. Multiply Line a2 by Line b2 to obtain a total amount for household members 65 and older, and enter the result in Line c2. Add Lines c1 and c2 to obtain a total health care amount, and enter the result in Line 19B.		
	Household members under 65 years of age	Household members 65 years o	f age or older
	a1. Allowance per member	a2. Allowance per member	
	b1. Number of members	b2. Number of members	
	c1. Subtotal	c2. Subtotal	\$
20A	Local Standards: housing and utilities; non-mor IRS Housing and Utilities Standards; non-mortgage e (This information is available at www.usdoj.gov/ust/ o	enses for the applicable county and househole	•

20B	Local Standards: housing and utilities; mortgage/rent expenses. Enter, in Line a below, the amount of the IRS Housing and Utilities Standards; mortgage/rent expense for your county and household size (this information is available at <a href="www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court); enter on Line b the total of the Average Monthly Payments for any debts secured by your home, as stated in Line 42; subtract Line b from Line a and enter the result in Line 20B. Do not enter an amount less than zero.		
	a. IRS Housing and Utilities Standards; mortgage/rental expense	\$	
	b. Average Monthly Payment for any debts secured by your	<b>.</b>	
	home, if any, as stated in Line 42  c. Net mortgage/rental expense	\$ Subtract Line b f	rom Line a
	c. Net mongagerental expense	Cubiract Line b 1	Tom Line a.
21	Local Standards: housing and utilities; adjustment. If you conclines 20A and 20B does not accurately compute the allowance to which you state the basis for your contention in the space below:		
			\$
	Local Standards: transportation; vehicle operation/public transport You are entitled to an expense allowance in this category regardless of wh operating a vehicle and regardless of whether you use public transportation	ether you pay the expenses of	
22A	Check the number of vehicles for which you pay the operating expenses of expenses are included as a contribution to your household expenses in Li   ▼ 0 □ 1 □ 2 or more.		
	If you checked 0, enter on Line 22A the "Public Transportation" amount fr	m IRS Local Standards: Transportation.	
	If you checked 1 or 2 or more, enter on Line 22A the "Operating Costs" ar	ount from IRS Local Standards:	
	Transportation for the applicable number of vehicles in the applicable Met Region. (These amounts are available at <a href="www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the		\$
	Local Standards: transportation; additional public transportation ex		j expenses
22B	for a vehicle and also use public transportation, and you contend that you your public transportation expenses, enter on Line 22B the "Public Transportation".		ds:
	Transportation. (This amount is available at <a href="https://www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court.)		
	Local Standards: transportation ownership/lease expense; Vehicle of vehicles for which you claim an ownership/lease expense. (You may no		
	expense for more than two vehicles.)		
	☐ 1 ☐ 2 or more.		
	Enter, in Line a below, the "Ownership Costs" for "One Car" from the IRS (available at <a href="https://www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy cou		
23	Monthly Payments for any debts secured by Vehicle 1, as stated in Line 4		
	Line a and enter the result in Line 23. <b>Do not enter an amount les</b>	s than zero.	
	IDC Transportation Chandrada Oursenhin Contr		
	a. IRS Transportation Standards, Ownership Costs	\$	
	b. Average Monthly Payment for any debts secured by Vehicle 1, as stated in Line 42	\$	\$
	c. Net ownership/lease expense for Vehicle 1	Subtract Line b from Line a.	
	Local Standarda, transportation arrangehin/local arrange. Valida	2	
	Local Standards: transportation ownership/lease expense; Vehicle Complete this Line only if you checked the "2 or more" Box in Line 23.	2.	
	Enter, in Line a below, the "Ownership Costs" for "One Car" from the IRS	•	
	(available at <a href="www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court); enter in Line b the total of the Average Monthly Payments for any debts secured by Vehicle 2, as stated in Line 42; subtract Line b		
24	from Line a and enter the result in Line 24. <b>Do not enter an amount le</b>		
4	a. IRS Transportation Standards, Ownership Costs \$		
	b. Average Monthly Payment for any debts secured by Vehicle 2, as stated in Line 42	\$	
c. Net ownership/lease expense for Vehicle 2			
		Subtract Line b from Line	\$ a.

25	Other Necessary Expenses: taxes. for all federal, state and local taxes, oth employment taxes, social-security taxes taxes.	er than real estate and sales taxes, such as income taxes, self	
26	payroll deductions that are required for	tory payroll deductions for employment. Enter the total average monthly your employment, such as retirement contributions, union dues, and uniform costs. Its, such as voluntary 401(k) contributions.	\$
27	Other Necessary Expenses: life ins pay for term life insurance for yourself. for whole life or for any other form of	Do not include premiums for insurance on your dependents,	\$
28		brdered payments. Enter the total monthly amount that you are required or administrative agency, such as spousal or child support payments. Le support obligations included in Line 44.	\$
29	challenged child. Enter the tot	tion for employment or for a physically or mentally tal average monthly amount that you actually expend for education that is a tion that is required for a physically or mentally challenged dependent viding similar services is available.	\$
30	Other Necessary Expenses: childca childcare - such as baby-sitting, day ca		\$
31	paid by a health savings account, and t	care. Enter the total average monthly amount that you actually expend on health welfare of yourself or your dependents, that is not reimbursed by insurance or that is in excess of the amount entered in Line 19B.  insurance or health savings accounts listed in Line 34.	\$
32	Other Necessary Expenses: telecommunication services. Enter the total average monthly amount that you actually pay for telecommunication services other than your basic home telephone and cell phone service such as		
33			
00	Total Expenses Allowed under IRS	Standards. Enter the total of Lines 19 through 32	\$
33	Subpa	art B: Additional Living Expense Deductions clude any expenses that you have listed in Lines 19-32	\$
33	Subpa Note: Do not inc	art B: Additional Living Expense Deductions	\$
33	Subpa Note: Do not inc	art B: Additional Living Expense Deductions clude any expenses that you have listed in Lines 19-32  Ice and Health Savings Account Expenses.  List the monthly expenses in the at are reasonably necessary for yourself, your spouse, or your dependents.	\$
33	Note: Do not inc  Health Insurance, Disability Insuran categories set out in lines a-c below tha	art B: Additional Living Expense Deductions clude any expenses that you have listed in Lines 19-32 ce and Health Savings Account Expenses.  List the monthly expenses in the	\$
	Subpa Note: Do not inc Health Insurance, Disability Insuran categories set out in lines a-c below that a. Health Insurance	clude any expenses that you have listed in Lines 19-32  ce and Health Savings Account Expenses. List the monthly expenses in the at are reasonably necessary for yourself, your spouse, or your dependents.	\$
34	Note: Do not inc  Health Insurance, Disability Insuran categories set out in lines a-c below that  a. Health Insurance b. Disability Insurance	art B: Additional Living Expense Deductions clude any expenses that you have listed in Lines 19-32  ce and Health Savings Account Expenses.  List the monthly expenses in the at are reasonably necessary for yourself, your spouse, or your dependents.  \$ \$	
	Subpa Note: Do not inc  Health Insurance, Disability Insuran categories set out in lines a-c below that  a. Health Insurance b. Disability Insurance c. Health Savings Account  Total and enter on Line 34	art B: Additional Living Expense Deductions clude any expenses that you have listed in Lines 19-32  ce and Health Savings Account Expenses.  List the monthly expenses in the at are reasonably necessary for yourself, your spouse, or your dependents.  \$ \$	\$
	Subpa Note: Do not inc  Health Insurance, Disability Insuran categories set out in lines a-c below that  a. Health Insurance b. Disability Insurance c. Health Savings Account  Total and enter on Line 34	clude any expenses that you have listed in Lines 19-32  ce and Health Savings Account Expenses. List the monthly expenses in the at are reasonably necessary for yourself, your spouse, or your dependents.  \$ \$ \$ \$	
	Note: Do not inc  Health Insurance, Disability Insuran categories set out in lines a-c below that  a. Health Insurance b. Disability Insurance c. Health Savings Account  Total and enter on Line 34  If you do not actually expend this to space below:  \$  Continued contributions to the care monthly expenses that you will continued.	art B: Additional Living Expense Deductions clude any expenses that you have listed in Lines 19-32  ce and Health Savings Account Expenses. List the monthly expenses in the at are reasonably necessary for yourself, your spouse, or your dependents.  \$ \$ \$ \$ total amount, state your actual total average monthly expenditures in the	
34	Note: Do not inc  Health Insurance, Disability Insuran categories set out in lines a-c below that  a. Health Insurance b. Disability Insurance c. Health Savings Account  Total and enter on Line 34  If you do not actually expend this aspace below:  \$  Continued contributions to the care monthly expenses that you will continue elderly, chronically ill, or disabled member unable to pay for such expenses.  Protection against family violence. incurred to maintain the safety of your for such expenses.	art B: Additional Living Expense Deductions clude any expenses that you have listed in Lines 19-32  ce and Health Savings Account Expenses. List the monthly expenses in the at are reasonably necessary for yourself, your spouse, or your dependents.  \$ \$ \$ total amount, state your actual total average monthly expenditures in the at a pay for the reasonable and necessary care and support of an	\$

38	Education expenses for dependent children less than 18. Enter the total average monthly expenses that you actually incur, not to exceed \$137.50 per child, for attendance at a private or public elementary or secondary school by your dependent children less than 18 years of age. You must provide your case trustee with documentation of your actual expenses, and you must explain why the amount claimed is reasonable and necessary and not already accounted for in the IRS Standards.							
39	Additional food and clothing expense. Enter the total average monthly amount by which your food and clothing expenses exceed the combined allowances for food and clothing (apparel and services) in the IRS National Standards, not to exceed 5% of those combined allowances. (This information is available at <a href="www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court.) You must demonstrate that the additional amount claimed is reasonable and necessary.							
40		nued charitable contribut f cash or financial instrum	tions. Enter the amount that you ents to a charitable organization as define			\$		
41	Total	Additional Expense Ded	uctions under § 707(b). Enter the to	otal of Lines 34 through 40	)	\$		
			Subpart C: Deductions f	or Debt Payment				
	you ow Payme total of filing o	Future payments on secured claims. For each of your debts that is secured by an interest in property that you own, list the name of the creditor, identify the property securing the debt, state the Average Monthly Payment, and check whether the payment includes taxes or insurance. The Average Monthly Payment is the total of all amounts scheduled as contractually due to each Secured Creditor in the 60 months following the filing of the bankruptcy case, divided by 60. If necessary, list additional entries on a separate page. Enter the total of the Average Monthly Payments on Line 42.						
42		Name of Creditor	Property Securing the Debt	Average Monthly Payment	Does payment include taxes or insurance?			
72	a.			\$	☐ yes ☐no			
	b.			\$	☐ yes ☐no			
	C.			\$	☐ yes ☐no			
	d.			\$	☐ yes ☐no			
	e.			\$	☐ yes ☐no			
				Total: Add Lines a - e	\$			
Other payments on secured claims. If any of the debts listed in Line 42 are secured by your primary residence, a motor vehicle, or other property necessary for your support or the support of your dependents, you may include in your deduction 1/60th of any amount (the "cure amount") that you must pay the creditor in addition to the payments listed in Line 42, in order to maintain possession of the property. The cure amount would include any sums in default that must be paid in order to avoid repossession or foreclosure. List and total any such amounts in the following chart. If necessary, list additional entries on a separate page.								
43		Name of Creditor	Property Securing the Debt	1/60th of the Cure	Amount			
	a.			\$				
	b. c.			\$	\$			
	d.			\$				
	e.			\$				
			1	Total: Add Lines a	- e	\$		
Payments on prepetition priority claims. Enter the total amount, divided by 60, of all priority claims, such								
44	as priority tax, child support and alimony claims, for which you were liable at the time of your bankruptcy filing.  Do not include current obligations, such as those set out in Line 28.							

	Expense Description	Monthly Amount
a.		\$
b.		\$
C.		\$
	Total: Add Lines a, b, and c	\$

B22A (Official Form 22A) (Chapter 7) (12/08) - Cont.

(							
Part VIII: VERIFICATION							
	I declare under penalty of perjury that the information both debtors must sign.)	ation provided in this statement is true and correct. (If this a joint case,					
57	Date: Signature:	/s/ Jeffrey Ronald Franklin (Debtor)					
	Date: Signature:	(Joint Debtor, if any )					

8

# UNITED STATES BANKRUPTCY COURT SOUTHERN DISTRICT OF CALIFORNIA

In re Jeffrey Ronald Franklin	Case No. Chapter 7	
/ Debtor		

### **SUMMARY OF SCHEDULES**

Indicate as to each schedule whether that schedule is attached and state the number of pages in each. Report the totals from Schedules A, B, D, E, F, I, and J in the boxes provided. Add the amounts from Schedules A and B to determine the total amount of the debtor's assets. Add the amounts of all claims from Schedules D, E, and F to determine the total amount of the debtor's liabilities. Individual debtors must also complete the "Statistical Summary of Certain Liabilities and Related Data"if they file a case under chapter 7, 11, or 13.

NAME OF SCHEDULE	Attached (Yes/No)	No. of Sheets	ASSETS		LIABILITIES		OTHER
A-Real Property	Yes	1	\$	626,171.00			
B-Personal Property	Yes	4	\$	6,603.96			
C-Property Claimed as Exempt	Yes	1					
D-Creditors Holding Secured Claims	Yes	2			\$	847,542.00	
E-Creditors Holding Unsecured Priority Claims (Total of Claims on Schedule E)	Yes	3			\$	8,624.30	
F-Creditors Holding Unsecured Nonpriority Claims	Yes	8			\$	318,922.90	
G-Executory Contracts and Unexpired Leases	Yes	1					
H-Codebtors	Yes	1					
I-Current Income of Individual Debtor(s)	Yes	1					\$ 7,804.00
J-Current Expenditures of Individual Debtor(s)	Yes	1					\$ 7,961.00
ТОТ	23	\$	632,774.96	\$	1,175,089.20		

# UNITED STATES BANKRUPTCY COURT SOUTHERN DISTRICT OF CALIFORNIA

Mile Jeffrey Ronald Franklin		Case No.	
		Chapter	7
	/ Debtor		

#### STATISTICAL SUMMARY OF CERTAIN LIABILITIES AND RELATED DATA (28 U.S.C § 159)

If you are an individual debtor whose debts are primarily consumer debts, as defined in § 101(8) of the Bankruptcy Code (11 U.S.C. § 101(8), filing a case under chapter 7, 11, or 13, you must report all information requested below.

Check this box if you are an individual debtor whose debts are NOT primarily consumer debts. You are not required to report any information here.

This information is for statistical purposes only under 28 U.S.C. § 159.

Summarize the following types of liabilities, as reported in the Schedules, and total them.

Type of Liability	Amount
Domestic Support Obligations (from Schedule E)	\$ 0.00
Taxes and Certain Other Debts Owed to Governmental Units (from Schedule E)	\$ 8,624.30
Claims for Death or Personal Injury While Debtor Was Intoxicated (from Schedule E) (whether disputed or undisputed)	\$ 0.00
Student Loan Obligations (from Schedule F)	\$ 0.00
Domestic Support, Separation Agreement, and Divorce Decree Obligations Not Reported on Schedule	\$ 0.00
E Obligations to Pension or Profit-Sharing, and Other Similar Obligations (from Schedule F)	\$ 0.00
TOTAL	\$ 8,624.30

#### State the following:

Average Income (from Schedule I, Line 16)	\$ 7,804.00
Average Expenses (from Schedule J, Line 18)	\$ 7,961.00
Current Monthly Income (from Form 22A Line 12; OR, Form 22B Line 11; OR, Form 22C Line 20)	\$ 2,948.00

#### State the following:

1. Total from Schedule D, "UNSECURED PORTION, IF ANY" column		\$ 221,371.00
2. Total from Schedule E, "AMOUNT ENTITLED TO PRIORITY" column	\$ 8,624.30	
3. Total from Schedule E, "AMOUNT NOT ENTITLED TO PRIORITY, IF ANY" column		\$ 0.00
4. Total from Schedule F		\$ 318,922.90
5. Total of non-priority unsecured debt (sum of 1, 3, and 4)		\$ 540,293.90

Case 09-14623-PB7	Filed 09/29/09	Doc 1	Pg. 16 of 59

B6 Declaration (Official Form 6 - Declaration) (12/07)

In re Jeffrey Ronald Franklin	Case No.
Debtor	(if known)

### **DECLARATION CONCERNING DEBTOR'S SCHEDULES**

#### DECLARATION UNDER PENALTY OF PERJURY BY AN INDIVIDUAL DEBTOR

				-				
	I declare under penalty of perjury that I have read the foregoing summary and schedules, consisting of correct to the best of my knowledge, information and belief.							
Date:	9/28/2009							
		[If joint case, both spouses must sign.]						
		Signature /s/ Jeffrey Ronald Fra Jeffrey Ronald Franklin						

Penalty for making a false statement or concealing property: Fine of up to \$500,000 or imprisonment for up to 5 years or both. 18 U.S.C. §§ 152 and 3571.

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FORM B6A (Official Form 6A) (12/07)

In re Jeffrey Ronald Franklin	Case No.
Debtor(s)	, (if known

#### SCHEDULE A-REAL PROPERTY

Except as directed below, list all real property in which the debtor has any legal, equitable, or future interest, including all property owned as a cotenant community property, or in which the debtor has a life estate. Include any property in which the debtor holds rights and powers exercisable for the debtor's own benefit. If the debtor is married, state whether the husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor holds no interest in real property, write "None" under "Description and Location of Property."

Do not include interests in executory contracts and unexpired leases on this schedule. List them in Schedule G-Executory Contracts and Unexpired Leases.

If an entity claims to have a lien or hold a secured interest in any property, state the amount of the secured claim. See Schedule D. If no entity claims to hold a secured interest in the property, write "None" in the column labeled "Amount of Secured Claim."

If the debtor is an individual or if a joint petition is filed, state the amount of any exemption claimed in the property only in Schedule C - Property Claimed as Exempt.

Description and Location of Property	Nature of Debtor's Interest in Property	HusbandH WifeW JointJ CommunityC	Current Value of Debtor's Interest, in Property Without Deducting any Secured Claim or Exemption	Amount of Secured Claim
22303 Casa De Carol Ramona, CA 92065	Fee Simple		\$ 357,000.00	\$ 364,934.00
1828 Toscanini Way Las Vegas, NV 89030	Fee Simple		\$ 124,371.00	\$ 207,450.00
6958 W. Purdue Ave. Peoria, AZ 85345	Fee Simple		\$ 74,900.00	\$ 104,204.00
4053 W. Puget Ave. Phoenix, AZ 85051	Fee Simple		\$ 69,900.00	\$ 170,954.00

TOTAL \$ 626,171.00 (Report also on Summary of Schedules.)

No continuation sheets attached

In re Jeffrey Ronald Franklin	Case No.
Debtor(s)	, (if known

#### SCHEDULE B-PERSONAL PROPERTY

Except as directed below, list all personal property of the debtor of whatever kind. If the debtor has no property in one or more of the categories, place an "x" in the appropriate position in the column labeled "None." If additional space is needed in any category, attach a separate sheet properly identified with the case name, case number, and the number of the category. If the debtor is married, state whether the husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor is an individual or a joint petition is filed, state the amount of any exemptions claimed only in Schedule C - Property Claimed as Exempt.

Do not list interests in executory contracts and unexpired leases on this schedule. List them in Schedule G-Executory Contracts and Unexpired Leases.

If the property is being held for the debtor by someone else, state that person's name and address under "Description and Location of Property." If the property is being held for a minor child, simply state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

Type of Property	N o n	Description and Location of Property	Joi	feW ntJ	Current Value of Debtor's Interest, in Property Without Deducting any Secured Claim or Exemption
1. Cash on hand.	е	Cash Location: In debtor's possession	Communit	tyC	\$ 20.00
Checking, savings or other financial accounts, certificates of deposit, or shares in banks, savings and loan, thrift, building and loan, and homestead associations, or credit unions, brokerage houses, or cooperatives.		Business Checking Acct.#-616-004867 Bank of the West 8867 Cuyamaca St. Santee, CA 92071 Location: In bank's possession			\$ 170.00
		Business Checking Acct.#-401-252224-2 Chase P.O. Box 660022 Dallas, TX 75266-0022 Location: In bank's possession			\$ 10.00
		Checking Acct.#-401-252073-3 Chase P.O. Box 660022 Dallas, TX 75266-0022 Location: In bank's possession			\$ 30.00
		Savings Acct.#-955-602366-5 Chase P.O. Box 660022 Dallas, TX 75266-0022 Location: In bank's possession			\$ 80.00
Security deposits with public utilities, telephone companies, landlords, and others.	x				

In re <b>Jeffrey Ronald Franklin</b>	. Case No.
Debtor(s)	(if known

### **SCHEDULE B-PERSONAL PROPERTY**

		(Continuation Sheet)			
Type of Property	N	Description and Location of Property			Current Value of Debtor's Interest,
	o n e	c	Husband- Wife- Joint- community-	W J	in Property Without Deducting any Secured Claim or Exemption
Household goods and furnishings, including audio, video, and computer equipment.		Furniture, appliances, etc. Location: In debtor's possession			\$ 2,800.00
Books, pictures and other art objects, antiques, stamp, coin, record, tape, compact disc, and other collections or collectibles.	X				
6. Wearing apparel.		Clothing Location: In debtor's possession			\$ 300.00
7. Furs and jewelry.	X				
8. Firearms and sports, photographic, and other hobby equipment.	X				
Interests in insurance policies. Name insurance company of each policy and itemize surrender or refund value of each.	X				
10. Annuities. Itemize and name each issuer.	X				
11. Interest in an education IRA as defined in 26 U.S.C. 530(b)(1) or under a qualified State tuition plan as defined in 26 U.S.C. 529(b)(1). Give particulars. (File separately the record(s) of any such interest(s). 11 U.S.C. 521(c).)	x				
Interests in IRA, ERISA, Keogh, or other pension or profit sharing plans. Give particulars.		IRA Acct.#-881-941821 TD Ameritrade Division of TD Ameritrade Inc. P.O. Box 2209 Omaha, NE 68103-2209 Location: In debtor's possession			\$ 1 <b>4</b> 3.96
Stock and interests in incorporated and unincorporated businesses. Itemize.		Acct.#-881-918262 TD Ameritrade Division of TD Ameritrade Inc. P.O. Box 2209 Omaha, NE 68103-2209 Location: In debtor's possession			\$ 50.00
14. Interests in partnerships or joint ventures. Itemize.	x				
Government and corporate bonds and other negotiable and non-negotiable instruments.	X				
	1				

In re Jeffrey Ronald Franklin	. Case No.
Debtor(s)	(if known

### **SCHEDULE B-PERSONAL PROPERTY**

		(Continuation Sheet)		
Type of Property	N	Description and Location of Property		Current Value of Debtor's Interest,
	o n		ifeW	in Property Without
	е	J Commu	intJ ityC	Exemption
16. Accounts Receivable.	X	'		
Alimony, maintenance, support, and property settlements to which the debtor is or may be entitled. Give particulars.	X			
Other liquidated debts owed to debtor including tax refunds. Give particulars.	X			
19. Equitable or future interests, life estates, and rights or powers exercisable for the benefit of the debtor other than those listed in Schedule of Real Property.	X			
Contingent and non-contingent interests in estate of a decedent, death benefit plan, life insurance policy, or trust.	X			
21. Other contingent and unliquidated claims of every nature, including tax refunds, counterclaims of the debtor, and rights to setoff claims. Give estimated value of each.	X			
22. Patents, copyrights, and other intellectual property. Give particulars.	X			
23. Licenses, franchises, and other general intangibles. Give particulars.	X			
24. Customer lists or other compilations containing personally identifiable information (as described in 11 U.S.C. 101(41A)) provided to the debtor by individuals in connection with obtaining a product or service from the debtor primarily for personal, family, or household purposes.	X			
25. Automobiles, trucks, trailers and other vehicles and accessories.		1981 Volvo Semi		\$ 0.00
venicies and accessories.		Location: In debtor's possession		
		1993 Peterbilt		\$ 3,000.00
		Location: In debtor's possession		
26. Boats, motors, and accessories.	X			
27. Aircraft and accessories.	X			
28. Office equipment, furnishings, and supplies.	x			
29. Machinery, fixtures, equipment and supplies used in business.	x			
30. Inventory.	X			

Page <u>4</u> of <u>4</u>

In re_Jeffrey Ronald Franklin	Case No
Debtor(s)	(if known)

### **SCHEDULE B-PERSONAL PROPERTY**

		(Oonandation Onect)			
					Current
Type of Property	N	Description and Location of Property			Value
	o				of Debtor's Interest, in Property Without
		Hu	sband- Wife-	-H -W	Deducting any Secured Claim or
	n		Joint-	J	Secured Claim or
	е	Comr	nunity-	-C	Exemption
31. Animals.	X	·			
32. Crops - growing or harvested.	X				
Give particulars.	Λ				
33. Farming equipment and implements.	X				
34. Farm supplies, chemicals, and feed.	X				
35. Other personal property of any kind not already listed. Itemize.	X				
already listed. Itemize.					
					l

B6C (Official Form 6C) (12/07)

In re		
Jeffrey Ronald Franklin	Case No.	
Debtor(s)	,	(if known)

## SCHEDULE C-PROPERTY CLAIMED AS EXEMPT

Debtor claims the exemptions to which debtor is entitled under:	$\hfill\Box$ Check if debtor claims a homestead exemption that exceeds \$136,875.

(Check one box)

☐ 11 U.S.C. § 522(b) (2)

☑ 11 U.S.C. § 522(b) (3)

Specify Law Providing each Exemption	Value of Claimed Exemption	Current Value of Property Without Deducting Exemptions
Calif. C.C.P. §703.140(b)(5)	\$ 20.00	\$ 20.00
Calif. C.C.P. §703.140(b)(5)	\$ 170.00	\$ 170.00
Calif. C.C.P. §703.140(b)(5)	\$ 10.00	\$ 10.00
Calif. C.C.P. §703.140(b)(5)	\$ 30.00	\$ 30.00
Calif. C.C.P. §703.140(b)(5)	\$ 80.00	\$ 80.00
Calif. C.C.P. §703.140(b)(3)	\$ 2,800.00	\$ 2,800.00
Calif. C.C.P. §703.140(b)(3)	\$ 300.00	\$ 300.00
Calif. C.C.P. §703.140(b)(10)(E)	\$ 143.96	\$ 143.96
Calif. C.C.P. §703.140(b)(5)	\$ 50.00	\$ 50.00
Calif. C.C.P. §703.140(b)(2)	\$ 3,000.00	\$ 3,000.00
	Providing each Exemption  Calif. C.C.P. \$703.140(b)(5)  Calif. C.C.P. \$703.140(b)(3)  Calif. C.C.P. \$703.140(b)(3)  Calif. C.C.P. \$703.140(b)(3)  Calif. C.C.P. \$703.140(b)(3)  Calif. C.C.P. \$703.140(b)(5)	Providing each Exemption       Claimed Exemption         Calif. C.C.P. \$703.140 (b) (5)       \$ 20.00         Calif. C.C.P. \$703.140 (b) (5)       \$ 170.00         Calif. C.C.P. \$703.140 (b) (5)       \$ 10.00         Calif. C.C.P. \$703.140 (b) (5)       \$ 30.00         Calif. C.C.P. \$703.140 (b) (5)       \$ 80.00         Calif. C.C.P. \$703.140 (b) (3)       \$ 2,800.00         Calif. C.C.P. \$703.140 (b) (3)       \$ 300.00         Calif. C.C.P. \$703.140 (b) (10) (E)       \$ 143.96         Calif. C.C.P. \$703.140 (b) (5)       \$ 50.00

B6D (Official Form 6D) (12/07)

<b>In re</b> Jeffrey Ronald Franklin	, Case No.	
Debtor(s)	_	(if known)

#### SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number of all entities holding claims secured by property of the debtor as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. List creditors holding all types of secured interests such as judgment liens, garnishments, statutory liens, mortgages, deeds of trust, and other security interests.

List creditors in alphabetical order to the extent practicable. If a minor child is the creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). If all secured creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H – Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Total the columns labeled "Amount of Claim Without Deducting Value of Collateral" and "Unsecured Portion, if Any" in the boxes labeled "Total(s)" on the last sheet of the completed schedule. Report the total from the column labeled "Amount of Claim Without Deducting Value of Collateral" also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report the total from the column labeled "Unsecured Portion, if Any" on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

Creditor's Name and Mailing Address Including ZIP Code and Account Number (See Instructions Above.)	Date Claim was Incurred, Nature of Lien, and Description and Market Value of Property Subject to Lien  HHusband WWife JJoint CCommunity	Contingent	Unliquidated	Disputed	Amount of Claim Without Deducting Value of Collateral	Unsecured Portion, If Any
Account No: 4875  Creditor # : 1  Bank of America  475 Crosspoint Pkwy.  Getzville NY 14068	7/1/2008 6958 W. Purdue Ave. Peoria, AZ 85345				\$ 11,685.00	\$ 11,685.00
Account No: 5167  Creditor # : 2  Bank of America 475 Crosspoint Pkwy.  Getzville NY 14068	Value: \$ 74,900.00  7/1/2008  6958 W. Purdue Ave. Peoria, AZ 85345				\$ 92,519.00	\$ 17,619.00
Account No: 3477  Creditor # : 3  Bank of America 475 Crosspoint Pkwy.  Getzville NY 14068	Value: \$ 74,900.00  2/1/2004  22303 Casa De Carol Ramona, CA 92065				\$ 271,934.00	\$ 0.00
1 continuation sheets attached	Value: \$ 357,000.00	Subte (Total of tr T (Use only on la	is p	age) I <b>\$</b> ige)	\$ 376,138.00 (Report also on Summary of	\$ 29,304.00

Schedules.)

Statistical Summary of Certain Liabilities and Related Data)

In re Jeffrey Ronald Franklin	_, Case No.	
Debtor(s)	(if know	n)

## **SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS**

			(Continuation Sheet)						
Creditor's Name and Mailing Address Including ZIP Code and Account Number (See Instructions Above.)	ပိ	of Lien, and D Value of Prop HHusband WWife JJoint	as Incurred, Nature Description and Market Perty Subject to Lien		Contingent	Unliquidated	Disputed	Amount of Claim Without Deducting Value of Collateral	Unsecured Portion, If Any
Account No: 5784		CCommunity 10/1/200	15					\$ 19,000.00	\$ 19,000.00
Creditor # : 4 Wells Fargo P.O. Box 31557 Billings MT 59107		4053 W. Phoenix,	Puget Ave. AZ 85051					\$ 13,000.00	<b>4</b> 23/000100
Account No: 5984		10/1/200						\$ 151,954.00	\$ 82,054.00
Creditor # : 5 Wells Fargo 8480 Stagecoach Cir. Frederick MD 21701		4053 W. Phoenix,	Puget Ave. AZ 85051					<b>¥</b> 151/351100	,,
		Value: \$ 6	59,900.00						
Account No: 3621		4/1/2007	7					\$ 207,450.00	\$ 83,079.00
Creditor # : 6 Wells Fargo 8480 Stagecoach Cir. Frederick MD 21701			scanini Way as, NV 89030						
		Value: <i>\$ 1</i>	24,371.00						
Account No: 4247  Creditor # : 7  Wells Fargo P.O. Box 31557  Billings MT 59107			7 Rsa De Carol CA 92065					\$ 93,000.00	\$ 7,934.00
		Value: \$ 3	357,000.00						
Account No:		Value:							
		Value							
Sheet no. 1 of 1 continuation she	-44-	Value:	of Conditors			Ш	-		
Sheet no. 1 of 1 continuation she Holding Secured Claims	ets attac	nea to Scheaule	e or Creditors	Sub (Total of				\$ 471,404.00	\$ 192,067.00
From the secured Claims				(Use only on	To	otal	<b>\$</b> ge)	\$ 847,542.00	\$ 221,371.00
							_	(Report also on Summary of (	if applicable, report also on

(Report also on Summary of Schedules.)

(If applicable, report also on Statistical Summary of Certain Liabilities and Related Data)

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B6E (Official Form 6E) (12/07)

In re Jeffrey Ronald Franklin

Debtor(s)

Case No.

(if known)

#### SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

A complete list of claims entitled to priority, listed separately by type of priority, is to be set forth on the sheets provided. Only holders of unsecured claims entitled to priority should be listed in this schedule. In the boxes provided on the attached sheets, state the name, mailing address, including zip code, and last four digits of the account number, if any, of all entities holding priority claims against the debtor or the property of the debtor, as of the date of the filing of the petition. Use a separate continuation sheet for each type of priority and label each with the type of priority.

The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H-Codebtors. If a joint petition is filed, state whether the husband, wife, both of them or the marital community may be liable on each claim by placing an "H", "W", "J", or "C" in the column labeled "Husband, Wife, Joint, or Community." If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of claims listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all claims listed on this Schedule E in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules.

Report the total of amounts entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Report the total of amounts NOT entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts not entitled to priority listed on this Schedule E in the box labeled "Total" on the last sheet of the completed schedule. Individual debtors with primarily consumer

Check this box if debtor has no creditors holding unsecured priority claims to report on this Schedule E. TYPES OF PRIORITY CLAIMS (Check the appropriate box(es) below if claims in that category are listed on the attached sheets) Domestic Support Obligations

Claims for domestic support that are owed to or recoverable by a spouse, former spouse, or child of the debtor, or the parent, legal guardian, or responsible relative of such a child, or a governmental unit to whom such a domestic support claim has been assigned to the extent provided in 11 U.S.C. § 507(a)(1).

Extensions of credit in an involuntary case

Claims arising in the ordinary course of the debtor's business or financial affairs after the commencement of the case but before the earlier of the appointment of a trustee or the order for relief. 11 U.S.C. § 507(a)(3).

Wages, salaries, and commissions

Wages, salaries, and commissions, including vacation, severance, and sick leave pay owing to employees and commissions owing to qualifying independent sales representatives up to \$10,950\* per person earned within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(4).

Contributions to employee benefit plans

Money owed to employee benefit plans for services rendered within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(5).

Certain farmers and fishermen

Claims of certain farmers and fishermen, up to \$5,400\* per farmer or fisherman, against the debtor, as provided in 11 U.S.C. § 507(a)(6).

Deposits by individuals

Claims of individuals up to \$2,425\* for deposits for the purchase, lease, or rental of property or services for personal, family, or household use, that were not delivered or provided. 11 U.S.C. § 507(a)(7).

Taxes and Certain Other Debts Owed to Governmental Units

Taxes, customs duties, and penalties owing to federal, state, and local governmental units as set forth in 11 U.S.C. § 507(a)(8).

Commitments to Maintain the Capital of an Insured Depository Institution

debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Claims based on commitments to FDIC, RTC, Director of the Office of Thrift Supervision, Comptroller of the Currency, or Board of Governors of the Federal Reserve System, or their predecessors or successors, to maintain the capital of an insured depository institution. 11 U.S.C. § 507(a)(9).

Claims for Death or Personal Injury While Debtor Was Intoxicated

Claims for death or personal injury resulting from the operation of a motor vehicle or vessel while the debtor was intoxicated from using alcohol, a drug, or another substance. 11 U.S.C. § 507(a)(10).

<sup>\*</sup>Amounts are subject to adjustment on April 1, 2010, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

Official Form 6E (12/07) - Cont.

<b>In re</b> Jeffrey Ronald Franklin	_ ,	Case No.	
Debtor(s)			(if known)

### SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

(Continuation Sheet)

Taxes and Certain Other Debts Owed to Governmental Units

Creditor's Name, Mailing Address Including ZIP Code, and Account Number (See instructions above.)	-Deb	Date Claim was Incurred and Consideration for Claim  HHusband WWife JJoint CCommunity	Contingent	Unliquidated	Disputed	Amount of Claim	Amount Entitled to Priority	Amount not Entitled to Priority, if any
Account No: 0907  Creditor # : 1  Department of the Treasury Internal Revenue Service  Ogden UT 84201		12/31/2005 Taxes Owed				\$ 1,750.07	\$ 1,750.07	\$ 0.00
Account No: 2000  Creditor # : 2 Franchise Tax Board P.O. Box 942857 Sacramento CA 94257		12/2007 Taxes Owed				\$ 602.00	\$ 602.00	\$ 0.00
Account No: 1445  Creditor # : 3  Internal Revenue Service  Cincinnati OH 45999		11/1/2008 Taxes Owed				\$ 372.00	\$ 372.00	\$ 0.00
Account No: 5167  Creditor # : 4  Maricopa County Treasurer 301 W. Jefferson St., Rm. #100  Phoenix AZ 85003		2006 Property Taxes				\$ 1,021.86	\$ 1,021.86	\$ 0.00
Account No: 77-2  Creditor # : 5  Maricopa County Treasurer 301 W. Jefferson St., Rm. #100  Phoenix AZ 85003		2007 Property Taxes				\$ 1,193.76	\$ 1,193.76	\$ 0.00
Account No: -017  Creditor # : 6  Office of the County Treasurer 500 S Grand Central Pkwy, Fl 1  P.O. Box 551220  Las Vegas NV 89155		2006-2007 Property Taxes				\$ 1,815.08	\$ 1,815.08	\$ 0.00
Sheet No. 1 of 2 continuation sheets to Schedule of Creditors Holding Priority Claims	atta	(Total o (Use only on last page of the completed Schedule E. Report to Summary of S	<b>To</b> total al	tal Iso dule	ge) \$ on es)	6,754.77	6,754.77	0.00
		(Use only on last page of the completed Schedule E. If applical also on the Statistical Summary of Certain Liabilities and Rela		ерс	ort			

In re_Jeffrey Ronald Franklin	<b>,</b>	Case No.	
Debtor(s)			(if known)

### SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

Type of Priority for Claims Listed on This Sheet:		Ta	xes and			n Sheet) <b>ther</b>	Debts	0	₩€	ed	to	Go	ver	nme	ent	al (	Jnit:	s	
Creditor's Name, Mailing Address Including ZIP Code, and Account Number (See instructions above.)	Co-Debtor	L N		Claim was				Contingent	Unliquidated	Disputed		mou Cla	int of		E	Amou ntitled Priorit	l to	Er F	nount not ntitled to Priority, if any
Account No: -017  Creditor # : 7  Office of the County Treasurer  500 S Grand Central Pkwy, F1 1  P.O. BOx 551220  Las Vegas NV 89155			207-2000 Property		s						\$	1,8	369.	53	\$	1,86	59.53		\$ 0.0
Account No:	_																		
Account No:																			
Account No:	_																		
Account No:	-																		
Account No:	_																		
Sheet No. 2 of 2 continuation sheets to Schedule of Creditors Holding Priority Claims	s at		ched (Use only on last	t page of the	completed			this <b>Tot</b> al al	pag t <b>al</b> Iso d	ge) \$ on			869. 624.	$\dashv$		1,86	59.53		0.0
			(Use only on last also on the Statis			Schedule E	E. If applicab	Tot	t <b>al</b>	\$ ort						8,62	?4.30		0.0

B6F (Official Form 6F) (12/07)

nre_Jeffrey Ronald Franklin	, Case No.
Dobto v/o)	

Debtor(s)

(if known)

#### SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number, of all entities holding unsecured claims without priority against the debtor or the property of the debtor, as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). Do not include claims listed in Schedules D and E. If all creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedules. Report this total also on the Summary of Schedules, and, if the debtor is an individual with primarily consumer debts, report this total also on the Statistical Summary of Certain Liabilities and Related Data.

☐ Check this box if debtor has no creditors holding unsecured claims to report on this Schedule F.

Creditor's Name, Mailing Address including Zip Code, And Account Number (See instructions above.)	Co-Debtor	Date Claim was Incurred, and Consideration for Claim. If Claim is Subject to Setoff, so State.  HHusband NWife JJoint CCommunity	Contingent	Unliquidated	Disputed	Amount of Claim
Account No: 7853  Creditor # : 1  American Express  P.O. Box 297812  Fort Lauderdale FL 33329		6/2008-12/2008 Credit Card Purchases				\$ 1,624.00
Account No: 1006  Creditor # : 2 American Express Business Card Customer Service P.O. Box 981535 El Paso TX 79998		6/2007-12/2008 Credit Card Purchases				\$ 1,624.01
Account No: 1006  Representing: American Express Business Card		Nationwide Credit , Inc. 2015 Vaughn Rd. NW, Bld. 400 Kennesaw GA 30144				
Account No: 3389  Creditor # : 3  At&T Business National c/o ERSolutions, Inc. P.O. Box 9004  Renton WA 98057		1/2008 Delinquent Bill				\$ 249.54
7 continuation sheets attached			Subt	tota Tota		\$ 3,497.55

(Use only on last page of the completed Schedule F. Report also on Summary of Schedules and, if applicable, on the Statistical Summary of Certain Liabilities and Related Data)

n re	Jeffrey	Ronald	Franklin
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Debtor(s)

Case	No.	
Just	140.	

(if known)

# SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

Creditor's Name, Mailing Address including Zip Code, And Account Number (See instructions above.)	Co-Debtor		Date Claim was Incurred, and Consideration for Claim. If Claim is Subject to Setoff, so State.  Husband Wife Joint	Contingent	Unliquidated	Disputed	Amount of Claim
Account No: 4826  Creditor # : 4  Bank of America P.O. Box 17054  Wilmington DE 19850-0000			Community  1/2001-11/2008  Credit Card Purchases				\$ 63,127.00
Account No: 4826  Representing: Bank of America			Firstsource Advantage, LLC 205 Bryant Woods South Buffalo NY 14228				
Account No: 4495  Creditor # : 5  Bank of America P.O. Box 15026 Wilmington DE 19850-5026			10/2008 Credit Card Purchases				\$ 202.52
Account No: 2264  Creditor # : 6 Bank of America Business WP P.O. Box 15184 Wilmington DE 19850-5184			1/2003-6/2007 Delinquent Bill				\$ 21,743.31
Account No: 2264  Representing: Bank of America Business WP			FIA Card Services www.FIACardServices.com				
Account No: 6466  Creditor # : 7  Bank of America Platinum  P.O. Box 15184  Wilmington DE 19850-5184			1/2004-7/2008 Delinquent Bill				\$ 14,707.52
Sheet No. 1 of 7 continuation sheets att Creditors Holding Unsecured Nonpriority Claims	tached t	to Se	Chedule of  (Use only on last page of the completed Schedule F. Report also on Sum and, if applicable, on the Statistical Summary of Certain Liabilities	mary of S	<b>Tot</b>	al \$	\$ 99,780.35

n re	Jeffrey	Ronald	Franklin
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Debtor(s)

Case	No.	
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(if known)

# SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

Creditor's Name, Mailing Address including Zip Code, And Account Number (See instructions above.)	Co-Debtor	J,	Date Claim was Incurred, and Consideration for Claim. If Claim is Subject to Setoff, so State. Husband Wife Joint Community	Contingent	Imigriidated	Disputed	Amount of Claim
Account No: 6466  Representing: Bank of America Platinum			FIA Card Services www.FIACardServices.com				
Account No: 6466  Representing: Bank of America Platinum			Creditors Interchange P.O. Box 1335 Buffalo NY 14240				
Account No: 8990  Creditor # : 8  Bank of America WorldPoints P.O. Box 15184  Wilmington DE 19850-5184			3/2007-12/2008 Credit Card Purchases				\$ 6,114.00
Account No: 8990  Representing: Bank of America WorldPoints			Mercantile Adjustment Bureau P.O. Box 9016 Buffalo NY 14231				
Account No: 5855  Creditor # : 9 Bank of America WorldPoints P.O. Box 15026 Wilmington DE 19850-5026			1/2005-11/2008 Credit Card Purchases				\$ 63,127.02
Account No: 0150  Creditor # : 10  Best Buy  P.O. Box 15521  Wilmington DE 19850-5521			7/2008-11/2008 Credit Card Purchases				\$ 936.00
Sheet No. 2 of 7 continuation sheets at Creditors Holding Unsecured Nonpriority Claims	ttached t	to Se	chedule of  (Use only on last page of the completed Schedule F. Report also o and, if applicable, on the Statistical Summary of Certain Lial	n Summary of S	<b>Tot</b>	al \$	\$ 70,177.02

ln	re	Jeffrey	Ronald	Franklin
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Debtor(s)

Case No.\_\_\_\_

(if known)

# SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

Creditor's Name, Mailing Address including Zip Code, And Account Number (See instructions above.)	Co-Debtor	J	Date Claim was Incurred, and Consideration for Claim. If Claim is Subject to Setoff, so State.	Contingent	Latering	Disputed	Amount of Claim
Account No: 0150  Representing: Best Buy			HSBC Bank Nevada, N.A. c/o Firstsource Advantage, LLC 205 Bryant Woods South Buffalo NY 14228				
Account No: 7867  Creditor # : 11  Capital One Bank  c/o NCO Financial Systems Inc.  P.O. Box 71083  Charlotte NC 28272			1/2005-6/2007 Delinquent Bill				\$ 2,553.97
Account No: 0767  Creditor # : 12 Chase P.O. Box 15298 Wilmington DE 19850-5298			1/20087-6/2008 Credit Card Purchases				\$ 37,822.73
Account No: 0767  Representing: Chase			JP Morgan Legal Dept. 300 S. Grand Ave., 4th Floor Los Angeles CA 90071				
Account No: 3477  Creditor # : 13  Chase Business Card  P.O. Box 15298  Wilmington DE 19850-5298			1/2002-1/2007 Credit Card Purchases				\$ 11,271.10
Account No: 3477  Representing: Chase Business Card			United Collection Bureau, Inc. 5620 Southwyck Blvd., Ste. 206 Toledo OH 43614				
Sheet No. 3 of 7 continuation sheets atta Creditors Holding Unsecured Nonpriority Claims	iched t	o So	hedule of  (Use only on last page of the completed Schedule F. Report also on S and, if applicable, on the Statistical Summary of Certain Liabilit	ummary of S	<b>To</b> t	tal \$	\$ 51,647.80

n re	Jeffrey	Ronald	Franklin
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Debtor(s)

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(if known)

# SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

Creditor's Name, Mailing Address			Date Claim was Incurred,		Ī		Amount of Claim
including Zip Code,	tor		and Consideration for Claim.  If Claim is Subject to Setoff, so State.	Ţ	Unliquidated		
And Account Number	Co-Debtor			Contingent	inid	Disputed	
(See instructions above.)	ပ်		Husband Wife	onti	nlia	ispi	
			Joint Community	ပ	=		
Account No: 9329			1/2002-8/2007				\$ 27,068.95
Creditor # : 14 Chase Business Card P.O. Box 15298 Wilmington DE 19850-5298			Credit Card Purchases				
Account No: 9329							
Representing:			NAFS				
Chase Business Card			165 Lawrence Bell Drive, #100 P.O. Box 9027 Buffalo NY 14231				
Account No: N/A			9/2/2009				\$ 300.00
Creditor # : 15 Deanna Malory P.O. Box 3398 Ramona CA 92065			Civil Claim				
Account No: 2097			5/2009-7/2009				\$ 6,041.52
Creditor # : 16 Dion and Sons, Inc. 1543 West 16th Street Long Beach CA 90813			Delinquent Bill				
Account No: 3078			1/2005-10/2008				\$ 7,297.39
Creditor # : 17 Discover Business Card P.O. Box 3023 New Albany OH 43054			Credit Card Purchases				
Account No: 3078							
Representing: Discover Business Card			Weltman, Weinberg & Reis Co. 175 South 3rd St., Suite 900 Columbus OH 43215				
Sheet No. 4 of 7 continuation sheets at Creditors Holding Unsecured Nonpriority Claims	ttached	to So	chedule of	Sub		al\$	\$ 40,707.86
5			(Use only on last page of the completed Schedule F. Report also on Sumr and, if applicable, on the Statistical Summary of Certain Liabilities	mary of S	chec	dules	

ln	re	Jeffrey	Ronald	Franklin
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Case No	
	(if known)

# SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

Creditor's Name, Mailing Address			Date Claim was Incurred,				Amount of Claim
including Zip Code,	Ď		and Consideration for Claim.	Ħ	ted		
And Account Number	o-Debtor		If Claim is Subject to Setoff, so State.	ngei	uida	ted	
(See instructions above.)	3	W JJ	Husband Wife oint	Contingent	Unliquidated	Disputed	
Account No: 5967		C(	1/2002-10/2007				\$ 23,632.00
Creditor # : 18 Discover Card P.O. Box 30943 Salt Lake City UT 84130			Credit Card Purchases				
Account No: 6239			3/27/2009	+			\$ 572.85
Creditor # : 19 Hidden Canyon Owners Assoc. Alessi & Koenig 9500 W. Flamingo Rd., Ste. 100 Las Vegas NV 89147			HOA Dues/ Lien				
Account No: <b>64-0</b>			6/2008-12/2008				\$ 906.40
Creditor # : 20 Macy's P.O. Box 689195 Des Moines IA 50368			Credit Card Purchases				
Account No: 64-0							
Representing: Macy's			Northland Group Inc. P.O. Box 390846 Minneapolis MN 55439				
Account No: 5-70			3/1/2001				\$ 14,642.97
Creditor # : 21 San Diego County Credit Union 6545 Sequence Drive San Diego CA 92121			Delinquent Bill				
Account No: 5-70							
Representing: San Diego County Credit Union			MCT Group Inc. P.O. Box 7748 Torrance CA 90504				
	1	1		1	1	1	
Sheet No. 5 of 7 continuation sheets attact Creditors Holding Unsecured Nonpriority Claims	ched t	o So	chedule of  (Use only on last page of the completed Schedule F. Report also on Summ and, if applicable, on the Statistical Summary of Certain Liabilities a	ary of S	Tot	al \$	\$ 39,754.22

n	re	Jeffrey	Ronald	Franklin
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Debtor(s)

Case No.

(if known)

## SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

Creditor's Name, Mailing Address including Zip Code, And Account Number (See instructions above.)  Account No: 1222	Co-Debtor	J	Date Claim was Incurred, and Consideration for Claim. If Claim is Subject to Setoff, so State.  Husband Wife Joint Community  12/2007-12/2008		Contingent	Unliquidated	Disputed	Amount of Claim \$ 4,151.00
Creditor # : 22 Sears Card P.O. Box 6283 Sioux Falls SD 57117			Credit Card Purchases					
Account No: 6723  Creditor # : 23  Sears Gold MasterCard  P.O. Box 6282  Sioux Falls SD 57117			1/2006-10/2008 Credit Card Purchases					\$ 1,085.06
Account No: 6723  Creditor # : 24  Sears Gold MasterCard  Citi Cards Payment Center  P.O. Box 182149  Columbus OH 43218			1/2006-6/2009 Delinquent Bill					\$ 1,893.23
Account No: 6723  Representing: Sears Gold MasterCard			AllianceOne 4850 Street Rd., Suite 300 Feasterville Tre PA 19053					
Account No: 8487  Creditor # : 25  The Home Depot P.O. Box 689100  Des Moines IA 50368			1/2005-9/2008 Credit Card Purchases					\$ 5,360.69
Account No: 8487  Representing: The Home Depot			Encore Receivable Management 400 N. Rogers Rd. P.O. Box 3330 Olathe KS 66063					
Sheet No. 6 of 7 continuation sheets att Creditors Holding Unsecured Nonpriority Claims	ached t	o So	Chedule of  (Use only on last page of the completed Schedule F. Report also on and, if applicable, on the Statistical Summary of Certain Liabi	Summary	of So		al \$	\$ 12,489.98

In re_ Jeffrey Ronald Franklin	, Case No	

Debtor(s)

(if known)

## SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

Creditor's Name, Mailing Address including Zip Code, And Account Number (See instructions above.)	Co-Debtor	J	Date Claim was Incurred, and Consideration for Claim. If Claim is Subject to Setoff, so State.  Husband -Wife Joint Community	Contingent	Unliquidated	Disputed	Amount of Claim
Account No: 0004  Creditor # : 26 Wells Fargo Business Visa P.O. Box 348750 Sacramento CA 95834			3/2008-12/2008 Credit Card Purchases				\$ 868.12
Account No: 0004  Representing: Wells Fargo Business Visa			Client Services, Inc. 3451 Harry Truman Blvd. Saint Charles MO 63301				
Account No:							
Account No:							
Account No:							
Account No:							
Sheet No. 7 of 7 continuation sheets attac	ched	to S	chedule of	Subt			\$ 868.12
Creditors Holding Unsecured Nonpriority Claims			(Use only on last page of the completed Schedule F. Report also on Summa and, if applicable, on the Statistical Summary of Certain Liabilities and	ry of S	Tota ched	ules	\$ 318,922.90

	Case 09-14623-PB7	Filed 09/29/09	Doc 1	Pa. 36 of 59
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B6G (Official Form 6G) (12/07)

In re Jeffrey Ronald Franklin	/ Debtor	Case No.	
		-	(if known)

### SCHEDULE G-EXECUTORY CONTRACTS AND UNEXPIRED LEASES

Describe all executory contracts of any nature and all unexpired leases of real or personal property. Include any timeshare interests. State the nature of debtor's interests in contract, i.e., "Purchaser," "Agent," etc. State whether debtor is the lessor or lessee of a lease. Provide the names and complete mailing addresses of all other parties to each lease or contract described. If a minor child is a party to one of the leases or contracts, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

□ Check this box if the debtor has no executory contracts or unexpired leases.

Name and Mailing Address, Including Zip Code, of Other Parties to Lease or Contract.	Description of Contract or Lease and Nature of Debtor's Interest. State whether Lease is for Nonresidential Real Property. State Contract Number of any Government Contract.

Case 09-14623-PB7	Filed 09/29/09	Doc 1	Pa. 37 of 59

B6H (Official Form 6H) (12/07)

In re Jeffrey Ronald Franklin	/ Debtor	Case No.	
	<u> </u>	· <del>-</del>	(if known)

### SCHEDULE H-CODEBTORS

Provide the information requested concerning any person or entity, other than a spouse in a joint case, that is also liable on any debts listed by the debtor in the schedules of creditors. Include all guarantors and co-signers. If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within the eight year period immediately preceding the commencement of the case, identify the name of the debtors spouse and of any former spouse who resides or resided with the debtor in the community property state, commonwealth, or territory. Include all names used by the nondebtor spouse during the eight years immediately preceding the commencement of this case. If a minor child is a codebtor or a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

☑ Check this box if the debtor has no codebtors.

Name and Address of Codebtor	Name and Address of Creditor

In re Jeffrey Ronald Franklin	Case No.
Debtor(s)	(if known)

## SCHEDULE I - CURRENT INCOME OF INDIVIDUAL DEBTOR(S)

The column labeled "Spouse" must be completed in all cases filed by joint debtors and by every married debtor, whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. Do not state the name of any minor child. The average monthly income calculated on this form may differ from the current monthly income calculated on Form 22A, 22B, or 22C.

form may differ from the cu	rrent monthly income calculated on Form 22A, 22B, or 22C.				
Debtor's Marital DEPENDENTS OF DEBTOR AND SPOUSE					
Status: Single	RELATIONSHIP(S):		AGE(S):		
EMPLOYMENT:	DEBTOR		SPO	USE	
Occupation	Trucking				
Name of Employer	Self Employed				
How Long Employed	10 yrs.				
Address of Employer	Ramona CA 92065				
INCOME: (Estimate of avera	ge or projected monthly income at time case filed)		DEBTOR	SPOUS	
Monthly gross wages, sala     Estimate monthly overtime	ary, and commissions (Prorate if not paid monthly)	\$ \$	0.00 0.00		0.00 0.00
3. SUBTOTAL	•	\$	0.00		0.00
LESS PAYROLL DEDUC     a. Payroll taxes and soci		\$	0.00	\$	0.00
b. Insurance	•	\$	0.00	\$	0.00
<ul><li>c. Union dues</li><li>d. Other (Specify):</li></ul>		\$ \$	0.00 0.00	*	0.00 0.00
5. SUBTOTAL OF PAYROL	L DEDUCTIONS	\$	0.00	\$	0.00
6. TOTAL NET MONTHLY 1	TAKE HOME PAY	\$	0.00	\$	0.00
	ration of business or profession or farm (attach detailed statement)	\$	4,473.00		0.00
<ul><li>8. Income from real property</li><li>9. Interest and dividends</li></ul>		\$ \$	3,331.00 0.00		0.00 0.00
<ol><li>Alimony, maintenance or of dependents listed above.</li></ol>	support payments payable to the debtor for the debtor's use or that	\$	0.00	\$	0.00
<ol><li>Social security or govern</li></ol>	ment assistance	•		•	
(Specify): 12. Pension or retirement inc	come	\$ \$	0.00 0.00		0.00 0.00
13. Other monthly income					
(Specify):		\$	0.00	\$	0.00
14. SUBTOTAL OF LINES 7	THROUGH 13	\$	7,804.00		0.00
15. AVERAGE MONTHLY IN	NCOME (Add amounts shown on lines 6 and 14)	\$	7,804.00	\$	0.00
	MONTHLY INCOME: (Combine column totals		\$	7,804.00	
from line 15; if there is on	ly one debtor repeat total reported on line 15)		t also on Summary of So iical Summary of Certain		
17. Describe any increase	e or decrease in income reasonably anticipated to occur within the year	following the filing	g of this document:		

In re Jeffrey Ronald Franklin	, Case No
Debtor(s)	(if known)

### SCHEDULE J-CURRENT EXPENDITURES OF INDIVIDUAL DEBTOR

Complete this schedule by estimating the average or projected monthly expenses of the debtor and the debtor's family. Prorate any payments made bi -weekly, quarterly, semi-annually, or annually to show monthly rate. The average monthly expenses calculated on this form may differ from the deductions from income allowed on Form 22 A or 22C.

☐ Check this box if a joint petition is filed and debtor's spouse maintains a separate household. Complete a separate schedule of expenditures labeled "Spouse."

4. Food		
1. Is property insurance included?         Yes	Rent or home mortgage payment (include lot rented for mobile home)	\$ 2,083.00
D. Is property insurance included? Yes	a. Are real estate taxes included? Yes \ \ \ No \ \ \	
2   Utilities a: Electricity and healing fuel   S.   3.15.0.00		
b. Water and sewer c. Telephone d. Other TV Cable Other S. 00.00 \$.00.00 \$.00.00 \$.00.00 \$.255.00 \$.255.00 \$.255.00 \$.255.00 \$.265.00 \$.265.00 \$.20.00 \$		\$ 315.00
C. Telephone   S.   1,00,00	, , ,	
Chefre	a Telephone	'
Other	` <u> </u>	- 1 - *
Nome maintenance (repairs and upkeep)	Other	T
Food   \$ 250.00   \$ 250.00   \$ 2,00.00	Guid.	
4. Food		
4 Food   \$ 250.00   \$ 250.00   \$ 2,00.00	3. Home maintenance (repairs and upkeep)	\$ 0.00
5. Clothing         \$ 20.00           6. Laundry and dry cleaning         \$ 20.00           7. Medical and dental expenses         \$ 260.00           8. Transportation (not including car payments)         \$ 3000.00           9. Recreation, clubs and entertainment, newspapers, magazines, etc.         \$ 0.00           10. Charitable contributions         \$ 0.00           11. Insurance (not deducted from wages or included in home mortgage payments)         \$ 90.00           1. Life         \$ 0.00           a. Homeowner's or renter's         \$ 90.00           b. Life         \$ 0.00           c. Health         \$ 0.00           d. Auto         \$ 80.00           e. Other         \$ 0.00           Other         \$ 0.00           12. Taxes (not deducted from wages or included in home mortgage)         \$ 0.00           (Specify)         \$ 0.00           12. Taxes (not deducted from wages or included in home mortgage)         \$ 0.00           (Specify)         \$ 0.00           1. Installment payments: (in chapter 11, 12, and 13 cases, do not list payments to be included in the plan)         \$ 0.00           a. Auto         \$ 0.00           b. Other:         \$ 0.00           6. Other:         \$ 0.00           7. Other:         \$ 0.00		\$ 250.00
6. Laundry and dry cleaning \$ 20.00 7. Medical and charlal expenses \$ 260.00 7. Medical and charlal expenses \$ 260.00 9. Recreation, lob including car payments) \$ 300.00 9. Recreation, clubs and entertainment, newspapers, magazines, etc. \$ 0.00 10. Charitable contributions \$ 0.00 11. Insurance (not deducted from wages or included in home mortgage payments)  a. Homeowner's or renter's \$ 90.00 b. Life \$ 0.00 c. Health \$ 0.00 d. Auto \$ 8.00 e. Other \$ 0.00 Other \$ 0.00 Other \$ 0.00  12. Taxes (not deducted from wages or included in home mortgage) (Specify) 13. Installment payments: (in chapter 11, 12, and 13 cases, do not list payments to be included in the plan) a. Auto \$ 0.00 b. Other: \$ 0.00 c. Other: \$ 0.00 c. Other: \$ 0.00 14. Alimony, maintenance, and support paid to others \$ 0.00 15. Payments for support of additional dependents not living at your home \$ 0.00 16. Regular expenses from operation of business, profession, or farm (attach detailed statement) \$ 3, 3,855.00 17. Other: Property Taxes Other, Air Card \$ 0.00 18. AVERAGE MONTHLY EXPENSES Total lines 1-17. Report also on Summary of Schedules and, if applicable, on the Statistical Summary of Certain Liabilities and Related Data.) 19. Describe any increase or decrease in expenditures reasonably anticipated to occur within the year following the filing of this document:  20. STATEMENT OF MONTHLY EXPENSES Total Lines 1-17. Report also on Summary of Schedules a. Average monthly income from Line 16 of Schedule 1		\$ 20.00
7. Medical and dental expenses \$ 260.00 8. Transportation (not including car payments) \$ 300.00 9. Recreation, clubs and entertainment, newspapers, magazines, etc. \$ 0,00 10. Charitable contributions \$ 0.00 11. Insurance (not deducted from wages or included in home mortgage payments)  a. Homeowner's or renter's \$ 90.00 b. Life \$ 0.00 c. Health \$ 0.00 d. Auto \$ 80.00 d. Auto \$ 80.00 d. Other \$ 0.00 Other \$ 0.00 Other \$ 0.00  12. Taxes (not deducted from wages or included in home mortgage) (Specify) \$ 0.00 13. Installment payments: (In chapter 11, 12, and 13 cases, do not list payments to be included in the plan) a. Auto \$ 0.00 b. Other: \$ 0.00 14. Alimony, maintenance, and support paid to others c. Other: \$ 0.00 15. Payments for support of additional dependents not living at your home \$ 0.00 16. Regular expenses from operation of business, profession, or farm (attach detailed statement) \$ 3, 855.00 17. Other: **Parperty** Taxes**		
8. Transportation (not including car payments) 9. Recreation, clubs and entertainment, newspapers, magazines, etc. 9. Recreation, clubs and entertainment, newspapers, magazines, etc. 9. O. 0. Ocharitable contributions 9. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0.		T
9. Recreation, clubs and entertainment, newspapers, magazines, etc. 10. Charitable contributions 11. Insurance (not deducted from wages or included in home mortgage payments) 2. A Homeowner's or enter's 3. 90.00 5. Life 6. Health 5. 0.00 6. Auto 6. Other 7. Chearth 7. Charitable contributions 12. Taxes (not deducted from wages or included in home mortgage) (Specify) 13. Installment payments: (in chapter 11, 12, and 13 cases, do not list payments to be included in the plan) 2. Auto 6. Other 7. Other 7. Other 8. 0.00 8. 0.00 9. Other 9. 0.00 14. Alimony, maintenance, and support paid to others 9. 0.00 15. Payments for support of additional dependents not living at your home 16. Regular expenses from operation of business, profession, or farm (attach detailed statement) 17. Other: Property Taxes 9. 282.00 18. AVERAGE MONTHLY EXPENSES Total lines 1-17. Report also on Summary of Schedules 20. STATEMENT OF MONTHLY PET INCOME 21. Average monthly increase or decrease in expenditures reasonably anticipated to occur within the year following the filing of this document:  20. STATEMENT OF MONTHLY PET INCOME 21. Average monthly income from Line 16 of Schedule 1 22. Average monthly income from Line 16 of Schedule 1 23. Average monthly expenses from Line 16 of Schedule 1 24. Average monthly expenses from Line 16 of Schedule 1 25. Average monthly expenses from Line 16 of Schedule 1 26. Average monthly expenses from Line 16 of Schedule 1 27. Average monthly expenses from Line 16 of Schedule 1 28. Average monthly expenses from Line 16 of Schedule 1 29. Average monthly expenses from Line 16 of Schedule 1 29. Average monthly expenses from Line 16 of Schedule 1 20. Average monthly expenses from Line 16 of Schedule 1 20. Average monthly expenses from Line 16 of Schedule 1 20. Average monthly expenses from Line 16 of Schedule 1 20. Average monthly expenses from Line 16 of Schedule 1 20. Average monthly expenses from Line 16 of Schedule 1 20. Average monthly expenses from Line 16 of Schedule 1 20. Average monthly expenses from Line 1		
10. Charitable contributions  11. Insurance (not deducted from wages or included in home mortgage payments)  a. Homeowner's or renter's b. Life c. Health S. 0.00 c. Health S. 0.00 d. Auto S. 80.00 e. Other Other Other Other S. 0.00  12. Taxes (not deducted from wages or included in home mortgage) (Specify) Other S. 0.00  13. Installment payments: (in chapter 11, 12, and 13 cases, do not list payments to be included in the plan) a. Auto b. Other: S. 0.00 b. Other: S. 0.00  14. Allimony, maintenance, and support paid to others C. Other: S. 0.00  15. Payments for support of additional dependents not living at your home S. 0.00 16. Regular expenses from operation of business, profession, or farm (attach detailed statement) S. 20.00  18. AVERAGE MONTHLY Taxes Other: Air Card  19. Describe any increase or decrease in expenditures reasonably anticipated to occur within the year following the filling of this document:  20. STATEMENT OF MONTHLY NET INCOME a. Average monthly expenses from Line 16 of Schedule 1 S. 7, 804.00 S. 7, 961.00	8. Transportation (not including car payments)	*
11. Insurance (not deducted from wages or included in home mortgage payments)  a. Homeowner's or renter's  b. Life  c. Health  d. Auto  e. Chealth  f. D. Other  Other  12. Taxes (not deducted from wages or included in home mortgage)  (Specify)  13. Installment payments: (in chapter 11, 12, and 13 cases, do not list payments to be included in the plan)  a. Auto  b. Other:  c. Other:  c. Other:  d. Auto  f. D. Other:	9. Recreation, clubs and entertainment, newspapers, magazines, etc.	\$ 0.00
a. Homeowner's or renter's b. Life c. Health c. Health d. S. 0.00 d. Auto e. Other O	10. Charitable contributions	\$ 0.00
b. Life	11. Insurance (not deducted from wages or included in home mortgage payments)	
b. Life \$ 0.00 c. Health \$ 0.00 d. Auto \$ 80.00 d. Auto \$ 80.00 e. Other \$ 0.00 Other \$ 0.00  12. Taxes (not deducted from wages or included in home mortgage) (Specify) \$ 0.00  13. Installment payments: (in chapter 11, 12, and 13 cases, do not list payments to be included in the plan) a. Auto \$ 0.00 b. Other: \$ 0.00 c. Other: \$ 0.00  14. Alimony, maintenance, and support paid to others \$ 0.00 15. Payments for support of additional dependents not living at your home \$ 0.00 16. Regular expenses from operation of business, profession, or farm (attach detailed statement) \$ 3, 255.00 To. Other: \$ 282.00 Other: Air Card \$ 282.00  18. AVERAGE MONTHLY EXPENSES Total lines 1-17. Report also on Summary of Schedules and, if applicable, on the Statistical Summary of Certain Liabilities and Related Data.) 19. Describe any increase or decrease in expenditures reasonably anticipated to occur within the year following the filing of this document:  20. STATEMENT OF MONTHLY NET INCOME a. Average monthly income from Line 16 of Schedule I \$ 7,804.00 b. Average monthly expenses from Line 18 above \$ 7,961.00	a. Homeowner's or renter's	\$ 90.00
C. Health		
d. Auto		'
e. Other Other S 0.00 Other S 0.00  12. Taxes (not deducted from wages or included in home mortgage) (Specify) S 0.00  13. Installment payments: (In chapter 11, 12, and 13 cases, do not list payments to be included in the plan) a. Auto b. Other: C. Other: S 0.00  14. Alimony, maintenance, and support paid to others S 0.00  15. Payments for support of additional dependents not living at your home S 0.00  16. Regular expenses from operation of business, profession, or farm (attach detailed statement) S 0.00  17. Other: Property Taxes Other: Air Card S 0.00  18. AVERAGE MONTHLY EXPENSES Total lines 1-17. Report also on Summary of Schedules and, if applicable, on the Statistical Summary of Certain Liabilities and Related Data.)  19. Describe any increase or decrease in expenditures reasonably anticipated to occur within the year following the filing of this document:  20. STATEMENT OF MONTHLY NET INCOME a. Average monthly income from Line 16 of Schedule 1 S 7, 804.00 b. Average monthly expenses from Line 18 above S 7, 961.00		
Other \$ 0.00  12. Taxes (not deducted from wages or included in home mortgage) (Specify) \$ 0.00  13. Installment payments: (in chapter 11, 12, and 13 cases, do not list payments to be included in the plan)  a. Auto \$ 0.00  b. Other: \$ 0.00  c. Other: \$ 0.00  14. Alimony, maintenance, and support paid to others \$ 0.00  15. Payments for support of additional dependents not living at your home \$ 0.00  16. Regular expenses from operation of business, profession, or farm (attach detailed statement) \$ 3,856,00  17. Other: Property Taxes \$ 282.00  Other: Air Card \$ 600,00  0.00  18. AVERAGE MONTHLY EXPENSES Total lines 1-17. Report also on Summary of Schedules and, if applicable, on the Statistical Summary of Certain Liabilities and Related Data.)  19. Describe any increase or decrease in expenditures reasonably anticipated to occur within the year following the filling of this document:  20. STATEMENT OF MONTHLY NET INCOME  a. Average monthly income from Line 16 of Schedule I \$ 7,804.00  b. Average monthly expenses from Line 18 above \$ 7,961.00		•
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	b. Average monthly expenses from Line 18 above	\$ 7,961.00
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## UNITED STATES BANKRUPTCY COURT SOUTHERN DISTRICT OF CALIFORNIA

In re: Jeffrey Ronald Franklin aka Jeff

Case No.

#### STATEMENT OF FINANCIAL AFFAIRS

This statement is to be completed by every debtor. Spouses filing a joint petition may file a single statement on which the information for both spouses is combined. If the case is filed under chapter 12 or chapter 13, a married debtor must furnish information for both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. An individual debtor engaged in business as a sole proprietor, partner, family farmer, or self-employed professional, should provide the information requested on this statement concerning all such activities as well as the individual's personal affairs. To indicate payments, transfers and the like to minor children, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not diclose the child's name. See, 11 U.S.C. § 112 and Fed. R. Bankr. P. 1007 (m).

Questions 1-18 are to be completed by all debtors. Debtors that are or have been in business, as defined below, also must complete Questions 19-25. If the answer to an applicable question is "None," mark the box labeled "None." If additional space is needed for the answer to any question, use and attach a separate sheet properly identified with the case name, case number (if known), and the number of the question.

#### **DEFINITIONS**

"In business." A debtor is "in business" for the purpose of this form if the debtor is a corporation or partnership. An individual debtor is "in business" for the purpose of this form if the debtor is or has been, within the six years immediately preceding the filing of this bankruptcy case, any of the following: an officer, director, managing executive, or owner of 5 percent or more of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership; a sole proprietor or self-employed full-time or part-time. An individual debtor my also be "in business" for the purpose of this form if the debtor engages in a trade, business, or other activity, other than as an employee, to supplement income from the debtor's primary employment.

"Insider." The term "insider" includes but is not limited to: relatives of the debtor; general partners of the debtor and their relatives; corporations of which the debtor is an officer, director, or person in control; officers, directors, and any owner of 5 percent or more of the voting or equity securities of a corporation debtor and their relatives; affiliates of the debtor and insiders of such affiliates; any managing agent of the debtor. 11 U.S.C. §101.

### 1. Income from employment or operation of business

None S

State the gross amount of income the debtor has received from employment, trade, or profession, or from operation of the debtor's business, including part-time activities either as an employee or in independent trade or business, from the beginning of this calendar year to the date this case was commenced. State also the gross amounts received during the two years immediately preceding this calendar year. (A debtor that maintains, or has maintained, financial records on the basis of a fiscal rather than a calendar year may report fiscal year income. Identify the beginning and ending dates of the debtor's fiscal year.) If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income of both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT SOURCE

Year to date:\$5,500.00

Business

Last Year: \$0.00 Year before: \$64,534.00

#### 2. Income other than from employment or operation of business

None

State the amount of income received by the debtor other than from employment, trade, profession, operation of the debtor's business during the two years immediately preceding the commencement of this case. Give particulars. If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income for each spouse whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT SOURCE

Year to date: \$16,319.00 Rent

Last Year: \$29,600.00

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AMOUNT SOURCE

Year before: \$24,37.00

#### 3. Payments to creditors

None

Complete a. or b., as appropriate, and c.

a. Individual or joint debtor(s) with primarily consumer debts: List all payments on loans, installment purchases of goods or services, and other debts to any creditor, made within 90 days immediately preceding the commencement of this case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$600. Indicate with an asterisk (\*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and creditor counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR	DATES OF PAYMENTS	AMOUNT PAID	AMOUNT STILL OWING
Creditor:Dion and Sons, Inc. Address:1543 West 16th Street Long Beach, CA 90813	6/2009	\$700.00	\$6,041.52
Creditor:Bank of America	7/2009	\$1,750.00	\$271,934.00
Address:475 Crosspoint Pkwy.	8/2009	\$1,750.00	
Getzville, NY 14068	9/2009	\$1,750.00	
Creditor:Wells Fargo	7/2009	\$350.00	\$93,000.00
Address:P.O. Box 31557	8/2009	\$350.00	
Billings, MT 59107	9/2009	\$350.00	

None

b. Debtor whose debts are not primarily consumer debts: List each payment or other transfer to any creditor made within 90 days immediately preceding the commencement of this case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$5,475. If the debtor is an individual, indicate with an asterisk (\*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and creditor counseling agency. (Married debtors filingunder chapter 12 or chapter 13 must include payments and other transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

None

c. All debtors: List all payments made within one year immediately preceding the commencement of this case to or for the benefit of creditors who are or were insiders. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

#### 4. Suits and administrative proceedings, executions, garnishments and attachments

None

a. List all suits and administrative proceedings to which the debtor is or was a party within one year immediately preceding the filing of this bankruptcy case.

(Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

CAPTION OF SUIT AND CASE NUMBER

NATURE OF PROCEEDING

COURT OR AGENCY AND LOCATION

STATUS OR DISPOSITION

Chase Bank USA vs. Jeff Franklin 37-2009-00068481-CU-CL-EC Complaint for Money

Superior Court of California, County of San Diego-Civil 250 E. Main Street El Cajon, CA 92020 Pending

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None  $\boxtimes$ 

b. Describe all property that has been attached, garnished or seized under any legal or equitable process within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

#### 5. Repossessions, foreclosures and returns

None  $\boxtimes$ 

List all property that has been repossessed by a creditor, sold at a foreclosure sale, transferred through a deed in lieu of foreclosure or returned to the seller, within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

### 6. Assignments and receiverships

None  $\boxtimes$ 

a. Describe any assignment of property for the benefit of creditors made within 120 days immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include any assignment by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

None  $\boxtimes$ 

b. List all property which has been in the hands of a custodian, receiver, or court-appointed official within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

#### 7. Gifts

None  $\boxtimes$ 

List all gifts or charitable contributions made within one year immediately preceding the commencement of this case except ordinary and usual gifts to family members aggregating less than \$200 in value per individual family member and charitable contributions aggregating less than \$100 per recipient. (Married debtors filing under chapter 12 or chapter 13 must include gifts or contributions by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

#### 8. Losses

None  $\boxtimes$ 

List all losses from fire, theft, other casualty or gambling within one year immediately preceding the commencement of this case or since the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include losses by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

#### 9. Payments related to debt counseling or bankruptcy

None List all payments made or property transferred by or on behalf of the debtor to any persons, including attorneys, for consultation concerning debt consolidation, relief under the bankruptcy law or preparation of a petition in bankruptcy within one year immediately preceding the commencement of this case.

DATE OF PAYMENT. AMOUNT OF MONEY OR

Payee: Brian Potts Date of Payment:8/13/2009 \$950.00

Address: 525 D STREET Payor: Jeff Ronald Franklin

Payee: Advantage Credit Counseling Service, Inc. Address: River Park Commons 2403 Sidney St., Suite 400

NAME AND ADDRESS OF PAYEE

RAMONA, CA 92065

Date of Payment:8/12/2009 Payor: Jeff Ronald Franklin

\$50.00

NAME OF PAYER IF OTHER THAN DEBTOR DESCRIPTION AND VALUE OF PROPERTY

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Form 7 (12/07)

NAME AND ADDRESS OF PAYEE

DATE OF PAYMENT, AMOUNT OF MONEY OR

NAME OF PAYER IF OTHER THAN DEBTOR DESCRIPTION AND VALUE OF PROPERTY

Pittsburgh, PA 15203

10. Other transfers

None a. List all other property, other than property transferred in the ordinary course of the business or financial affairs of the debtor, transferred either absolutely or as security within two years immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include transfers by

either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

3/4/2009

NAME AND ADDRESS OF

TRANSFEREE, RELATIONSHIP TO DEBTOR DATE DESCRIBE PROPERTY TRANSFERRED AND VALUE RECEIVED

Transferee:Robert Center

Address:5247 Lack Road Brawley, CA 92227

Relationship:N/A

Value:\$3,500.00

Transferee:Bill Novel Address:2149 Calle Poco

EL Cajon, CA 92019 Relationship:N/A 3/31/2009 Property:Motorcycle

Value:\$3,900.00

Property: Motorhome

Transferee:Bob Gall

Address:12218 Rock Crest Rd.

EL Cajon, CA 92040 Relationship:N/A 2/25/2009 Property:2000 Freightliner Truck

Value: \$3,800.00

Transferee: Josh Hank Address: 9687 Pietite Rd.

Lakeside, CA 92040 Relationship:N/A 1/26/2009

Property:Boat

Value: \$2,500.00

None

 $\boxtimes$ 

b. List all property transferred by the debtor within ten years immediately preceding the commencement of this case to a self-settled trust or similar device of which the debtor is a benificiary.

#### 11. Closed financial accounts

None

List all financial accounts and instruments held in the name of the debtor or for the benefit of the debtor which were closed, sold, or otherwise transferred within one year immediately preceding the commencement of this case. Include checking, savings, or other financial accounts, certificates of deposit, or other instruments; shares and share accounts held in banks, credit unions, pension funds, cooperatives, associations, brokerage houses and other financial institutions. (Married debtors filling under chapter 12 or chapter 13 must include information concerning accounts or instruments held by or for either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

#### 12. Safe deposit boxes

None

List each safe deposit or other box or depository in which the debtor has or had securities, cash, or other valuables within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include boxes or depositories of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

#### 13. Setoffs

None

List all setoffs made by any creditor, including a bank, against a debt or deposit of the debtor within 90 days preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

#### 14. Property held for another person

None

List all property owned by another person that the debtor holds or controls.

NAME AND ADDRESS OF OWNER

DESCRIPTION AND VALUE OF PROPERTY

LOCATION OF PROPERTY

Owner:Sherleen Bransom Address:812 W. 4th Street Description:Ford Truck Value:\$15,000.00

22303 Casa De Carol Ramona, CA 92065

Medford, OR 97501

Owner:Deleina Fraijo

Description: Deposit for

22303 Casa De Carol

Address: 4053 W. Puget Ave. Phoenix, AZ 93051

Rental Property Value: \$1,000.00

Ramona, CA 92065

Owner:Michelle Wilson

Description: Deposit for

22303 Casa De Carol Ramona, CA 92065

Address:1828 Toscanini Way

Rental Property Value: \$2,500.00

Las Vegas, NV 89032

#### 15. Prior address of debtor



If the debtor has moved within three years immediately preceding the commencement of this case, list all premises which the debtor occupied during that period and vacated prior to the commencement of this case. If a joint petition is filed, report also any separate address of either spouse.

#### 16. Spouses and Former Spouses

None

If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within eight years immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state.

## 17. Environmental Information

None

For the purpose of this question, the following definitions apply:

"Environmental Law" means any federal, state, or local statute or regulation regulating pollution, contamination, releases of hazardous or toxic substances, wastes or material into the air, land, soil, surface water, groundwater, or other medium, including, but not limited to, statutes or regulations regulating the cleanup of these substances, wastes, or material.

"Site" means any location, facility, or property as defined under any Environmental Law, whether or not presently or formerly owned or operated by the debtor, including, but not limited to disposal sites.

"Hazardous Material" means anything defined as hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, or contaminant or similar termunder an Environmental Law:

a. List the name and address of every site for which the debtor has received notice in writing by a governmental unit that it may be liable or potentially liable under or in violation of an Environmental Law. Indicate the governmental unit, the date of the notice, and, if known, the Environmental Law:

None	b. List the name and address of every site for which the debtor provided notice to a governmental unit of a release of Hazardous Material. Indicate the governmental unit to which the notice was sent and the date of the notice.				
None	c. List all judicial or administrative proceedings, including settlements or orders, under any Environmental Law, with respect to which the debtor is or was a party. Indicate the name and address of the governmental unit that is or was a party to the proceeding, and the docket number.				
None	18. Nature, location and name of business  a. If the debtor is an individual, list the names, addresses, taxpayer-identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was an officer, director, partner, or managing executive of a corporation, partner in a partnership, sole proprietor, or was self-employed in a trade, profession, or other activity either full- or part-time within six years immediately preceding the commencement of this case, or in which the debtor owned 5 percent or more of the voting or equity securities within six years immediately preceding the commencement of this case  If the debtor is a partnership, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all				
	businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities, within six years immediately preceding the commencment of this case.				
	If the debtor is a corporation, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities within six years immediately preceding the commencment of this case.				
NAME	LAST FOUR DIGITS OF SOCIAL-SECURITY OR ADDRESS NATURE OF BUSINESS ENDING DATES OTHER INDIVIDUAL TAXPAYER-I.D. NO. (ITIN)/ COMPLETE EIN				

22303 Casa De 1/3/2000-Franklin Trucking ID:7147 Trucking Carol Present Ramona, CA 92065 Franklin In ID:7147 22303 Casa De Trucking 9/29/2001-12/2006 Carol Ramona, CA 92065

b. Identify any business listed in response to subdivision a., above, that is "single asset real estate" as defined in 11 U.S.C. § 101.

None

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Form 7 (12/07)

#### NAME AND ADDRESS

#### DATES SERVICES RENDERED

The following questions are to be completed by every debtor that is a corporation or partnership and by any individual debtor who is or has been, within six years immediately preceding the commencement of this case, any of the following: an officer, director, managing executive, or owner of more than 5 percent of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership; a sole proprietor, or self-employed in a trade, profession, or other activity, either full- or part-time.

(An individual or joint debtor should complete this portion of the statement only if the debtor is or has been in business, as defined above, within six years immediately preceding the commencement of this case. A debtor who has not been in business within those six years should go directly to the signature page.)

None	19. Books, records and financial statements  a. List all bookkeepers and accountants who within two years immediately preceding the filing of this bankruptcy case kept or supervised the keeping of books of account and records of the debtor.				
NAME A	AND ADDRESS	DATES SERVICES RENDERED			
Name: Jeff R. Franklin  Address: 22303 Casa De Carol  Ramona, CA 92065  Dates: 1/3/2000- Present					
None	b. List all firms or individuals who within two years immediately preceding the filing of this bankruptcy case have audit prepared a financial statement of the debtor.	ed the books of account and records, or			
None	c. List all firms or individuals who at the time of the commencement of this case were in possession of the books of act the books of account and records are not available, explain.	count and records of the debtor. If any of			
None	d. List all financial institutions, creditors and other parties, including mercantile and trade agencies, to whom a financial s two years immediately preceding the commencement of this case.	statement was issued by the debtor within			
None	20. Inventories  a. List the dates of the last two inventories taken of your property, the name of the person who supervised the taking of e basis of each inventory.	each inventory, and the dollar amount and			
None	b. List the name and address of the person having possession of the records of each of the inventories reported in a., above.				

#### 21. Current Partners, Officers, Directors and Shareholders

a. If the debtor is a partnership, list the nature and percentage of partnership interest of each member of the partnership.

None

None	b. If the debtor is a corporation, list all more of the voting or equity securities of	officers and directors of the corporation, and each stockholder who directly or indirectly owns, controls, or holds 5 percent on the corporation.
None	22. Former partners, officers, a. If the debtor is a partnership, list each	directors and shareholders member who withdrew from the partnership within one year immediately preceding the commencement of this case.
None	b. If the debtor is a corporation, list commencement of this case.	all officers, or directors whose relationship with the corporation terminated within one year immediately preceding the
None	If the debtor is a partnership or corpora	ership or distribution by a corporation ation, list all withdrawals or distributions credited or given to an insider, including compensation in any form, bonuses, loans d any other perquisite during one year immediately preceding the commencement of this case.
None	The state of the s	ame and federal taxpayer-identification number of the parent corporation of any consolidated group for tax purposes of which ne within six years immediately preceeding the commencement of the case.
None		the name and federal taxpayer-identification number of any pension fund to which the debtor, as an employer, has beer within six years immediately preceding the commencement of the case.
[If comp	oleted by an individual or individual and	spouse]
	e under penalty of perjury that I have re true and correct.	ead the answers contained in the foregoing statement of financial affairs and any attachments thereto and that
ſ	Date 09/28/2009	Signature /s/ Jeffrey Ronald Franklin of Debtor
[	Date	Signature
		of Joint Debtor (if any)

## UNITED STATES BANKRUPTCY COURT SOUTHERN DISTRICT OF CALIFORNIA

In ra	Jeffrey Ronald Franklin		Case No.	
11110	aka Jeff		Chapter	7
		/ Debtor		
	Attorney for Debtor Brian Potts			

## **STATEMENT PURSUANT TO RULE 2016(B)**

The undersigned, pursuant to Rule 2016(b), Bankruptcy Rules, states that:

- 1. The undersigned is the attorney for the debtor(s) in this case.
- 2. The compensation paid or agreed to be paid by the debtor(s), to the undersigned is:
- 3. \$ 299.00 of the filing fee in this case has been paid.
- 4. The Services rendered or to be rendered include the following:
  - a) Analysis of the financial situation, and rendering advice and assistance to the debtor(s) in determining whether to file a petition under title 11 of the United States Code.
  - b) Preparation and filing of the petition, schedules, statement of financial affairs and other documents required by the court.
  - c) Representation of the debtor(s) at the meeting of creditors.
- 5. The source of payments made by the debtor(s) to the undersigned was from earnings, wages and compensation for services performed, and

None other

6. The source of payments to be made by the debtor(s) to the undersigned for the unpaid balance remaining, if any, will be from earnings, wages and compensation for services performed, and

None other

7. The undersigned has received no transfer, assignment or pledge of property from debtor(s) except the following for the value stated:

None

8. The undersigned has not shared or agreed to share with any other entity, other than with members of undersigned's law firm, any compensation paid or to be paid except as follows:

None

Dated: 09/28/2009 Respectfully submitted,

X/s/ Brian Potts
Attorney for Petitioner: Brian Potts

KRYSAK & ASSOCIATES 525 D STREET RAMONA CA 92065

(760) 789-9314 KRYSAK@aol.com Case 09-14623-PB7 Filed 09/29/09 Doc 1 Pg. 50 of 59

Other. Explain

☐ Claimed as exempt

Not claimed as exempt

Property is (check one):

# UNITED STATES BANKRUPTCY COURT SOUTHERN DISTRICT OF CALIFORNIA

nre Jeffrey Ronald Franklin	Case No. Chapter 7				
	/ Debtor				
CHAPTER 7 ST	CHAPTER 7 STATEMENT OF INTENTION				
Part A - Debts Secured by property of the estate. (Part A must be considered additional pages if necessary.)	ompleted for EACH debt which is secured by property of the estate. Attach				
Property No. 1					
Creditor's Name:  Bank of America	Describe Property Securing Debt:  22303 Casa De Carol				
Property will be (check one):  Surrendered Retained  If retaining the property, I intend to (check at least one):  Redeem the property Reaffirm the debt Other. Explain  Property is (check one):  Claimed as exempt Not claimed as exempt	(for example, avoid lien using 11 U.S.C § 522 (f)).				
Property No. 2					
Creditor's Name: Wells Fargo	Describe Property Securing Debt : 22303 Casa De Carol				
Property will be (check one):  Surrendered Retained  If retaining the property, I intend to (check at least one):  Redeem the property  Reaffirm the debt					

(for example, avoid lien using 11 U.S.C § 522 (f)).

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B 8 (Official Form 8) (12/08)

Property No. 3	
Creditor's Name :	Describe Property Securing Debt :
Wells Fargo	1828 Toscanini Way
Property will be (check one) :	
☐ Surrendered ☐ Retained	
If retaining the property, I intend to (check at least one):	
Redeem the property	
Reaffirm the debt	
Other. Explain	(for example, avoid lien using 11 U.S.C § 522 (f)).
Property is (check one):	
☐ Claimed as exempt ☐ Not claimed as exempt	
Property No. 4	
Creditor's Name :	Describe Property Securing Debt :
Bank of America	6958 W. Purdue Ave.
Property will be (check one) :	
⊠ Surrendered ☐ Retained	
If retaining the property, I intend to (check at least one):	
Redeem the property	
Reaffirm the debt	
Other. Explain	(for example, avoid lien using 11 U.S.C § 522 (f)).
Property is (check one) :	
☐ Claimed as exempt ☐ Not claimed as exempt	
Property No. 5	
Creditor's Name :	Describe Property Securing Debt :
Bank of America	6958 W. Purdue Ave.
Property will be (check one) :	
⊠ Surrendered ☐ Retained	
If retaining the property, I intend to (check at least one):	
Redeem the property	
Reaffirm the debt	
Other. Explain	(for example, avoid lien using 11 U.S.C § 522 (f)).
Property is (check one):	
☐ Claimed as exempt ☐ Not claimed as exempt	

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B 8 (Official Form 8) (12/08)

Property No. 6				
Creditor's Name :	Describe Property Securing Debt :			
Wells Fargo	4053 W. Puget Ave.			
Property will be (check one) :				
Surrendered Retained				
If retaining the property, I intend to (check at least one):				
Redeem the property				
☐ Reaffirm the debt				
☐ Other. Explain	(for example, avoid li	en using 11 U.S.C § 522 (f)).		
Property is (check one):				
☐ Claimed as exempt ☐ Not claimed as exempt				
Property No. 7				
Creditor's Name :	Describe Property Securing Debt :			
Wells Fargo	4053 W. Puget Ave.			
Property will be (check one) :				
☑ Surrendered ☐ Retained				
If retaining the property, I intend to (check at least one):				
Redeem the property				
Reaffirm the debt				
Other. Explain	(for example, avoid li	en using 11 U.S.C § 522 (f)).		
Property is (check one):				
☐ Claimed as exempt ☐ Not claimed as exempt				
Part B - Personal property subject to unexpired leases. (All three columns of Part B must be completed for each unexpired lease. Attach additional pages if necessary.)				
Property No.				
Lessor's Name: Describe Le	eased Property:	Lease will be assumed pursuant to 11 U.S.C. § 365 (p)(2):		
		☐ Yes ☐ No		
Signature of Debtor(s) I declare under penalty of perjury that the above indicates my intention as to any property of my estate securing a debt and/or personal property subject to an unexpired lease.				
Date: <u>09/28/2009</u> Debtor: <u>/s/</u>	Jeffrey Ronald Franklin			
Date: Joint Debtor:				

Brian Potts KRYSAK & ASSOCIATES 525 D STREET RAMONA, CA 92065 (760)789-9314 182097

## UNITED STATES BANKRUPTCY COURT SOUTHERN DISTRICT OF CALIFORNIA

	Teffrey Ronald Franklin Nka Jeff		Case No. Chapter 7
A	ttorney for Debtor: Brian Potts		
	2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2		
	VERIFICATION OF C	REDITOR MATRIX	<u> </u>
<u>Part I</u>	(check and complete one):		
	New petition filed. Creditor diskette required.		TOTAL NO. OF CREDITORS
	Conversion filed on:  Former Chapter 13 converting. Creditor diskette  Post-petition creditors added. Scannable matrix  There are no post-petition creditors. No matrix re	required.	TOTAL NO. OF CREDITORS
	Amendment or Balance of Schedules filed concurrently and/or Schedule of Equity Security Holders.  Names and addresses are being ADDED. Names and addresses are being DELETE Names and addresses are being CORREC	D.	able matrix affectiing Schedule of Debts
Part II	(check one):		
	The above-named Debtor(s) hereby verifies that the attached list of creditors is true and correct to the best of my (our) knowledge.		
	The above-named Debtor(s) hereby verifies that there a affected by the filing of the conversion of this case and		
Date: _	09/28/2009	/s/ Jeffrey Ron	ald Franklin

AllianceOne 4850 Street Rd., Suite 300 Feasterville Tre, PA 19053

American Express
P.O. Box 297812
Fort Lauderdale, FL 33329

American Express Business Card Customer Service P.O. Box 981535 El Paso, TX 79998

At&T Business National c/o ERSolutions, Inc. P.O. Box 9004 Renton, WA 98057

Bank of America P.O. Box 15026 Wilmington, DE 19850-5026

Bank of America 475 Crosspoint Pkwy. Getzville, NY 14068

Bank of America P.O. Box 17054 Wilmington, DE 19850-0000

Bank of America Business WP P.O. Box 15184 Wilmington, DE 19850-5184

Bank of America Platinum P.O. Box 15184 Wilmington, DE 19850-5184

Bank of America WorldPoints P.O. Box 15184 Wilmington, DE 19850-5184

Bank of America WorldPoints P.O. Box 15026 Wilmington, DE 19850-5026

Best Buy P.O. Box 15521 Wilmington, DE 19850-5521

Capital One Bank c/o NCO Financial Systems Inc. P.O. Box 71083 Charlotte, NC 28272

Chase P.O. Box 15298 Wilmington, DE 19850-5298

Chase Business Card
P.O. Box 15298
Wilmington, DE 19850-5298

Client Services, Inc. 3451 Harry Truman Blvd. Saint Charles, MO 63301 Creditors Interchange P.O. Box 1335 Buffalo, NY 14240

Deanna Malory P.O. Box 3398 Ramona, CA 92065

Department of the Treasury Internal Revenue Service Ogden, UT 84201

Dion and Sons, Inc. 1543 West 16th Street Long Beach, CA 90813

Discover Business Card P.O. Box 3023 New Albany, OH 43054

Discover Card P.O. Box 30943 Salt Lake City, UT 84130

Encore Receivable Management 400 N. Rogers Rd. P.O. Box 3330 Olathe, KS 66063

FIA Card Services
www.FIACardServices.com

Firstsource Advantage, LLC 205 Bryant Woods South Buffalo, NY 14228

Franchise Tax Board P.O. Box 942857 Sacramento, CA 94257

Hidden Canyon Owners Assoc. Alessi & Koenig 9500 W. Flamingo Rd., Ste. 100 Las Vegas, NV 89147

HSBC Bank Nevada, N.A. c/o Firstsource Advantage, LLC 205 Bryant Woods South Buffalo, NY 14228

Internal Revenue Service Cincinnati, OH 45999

JP Morgan Legal Dept. 300 S. Grand Ave., 4th Floor Los Angeles, CA 90071

Macy's P.O. Box 689195 Des Moines, IA 50368

Maricopa County Treasurer 301 W. Jefferson St., Rm. #100 Phoenix, AZ 85003 MCT Group Inc.
P.O. Box 7748
Torrance, CA 90504

Mercantile Adjustment Bureau P.O. Box 9016 Buffalo, NY 14231

NAFS 165 Lawrence Bell Drive, #100 P.O. Box 9027 Buffalo, NY 14231

Nationwide Credit , Inc. 2015 Vaughn Rd. NW, Bld. 400 Kennesaw, GA 30144

Northland Group Inc. P.O. Box 390846 Minneapolis, MN 55439

Office of the County Treasurer 500 S Grand Central Pkwy, Fl 1 P.O. BOx 551220 Las Vegas, NV 89155

San Diego County Credit Union 6545 Sequence Drive San Diego, CA 92121

Sears Card P.O. Box 6283 Sioux Falls, SD 57117 Sears Gold MasterCard P.O. Box 6282 Sioux Falls, SD 57117

Sears Gold MasterCard Citi Cards Payment Center P.O. Box 182149 Columbus, OH 43218

The Home Depot P.O. Box 689100 Des Moines, IA 50368

United Collection Bureau, Inc. 5620 Southwyck Blvd., Ste. 206 Toledo, OH 43614

Wells Fargo 8480 Stagecoach Cir. Frederick, MD 21701

Wells Fargo P.O. Box 31557 Billings, MT 59107

Wells Fargo Business Visa P.O. Box 348750 Sacramento, CA 95834

Weltman, Weinberg & Reis Co. 175 South 3rd St., Suite 900 Columbus, OH 43215